

59th Medical Wing



U.S. AIR FORCE

59 MDW Radiology Product Line Analysis

Information Brief
Briefer: LtCol Julian
Date: 18 Feb 05

Integrity - Service - Excellence

Overview

- Revised Financing & Business Plan
- San Antonio Multi-Service Market (SA-MM)
- Centralized Consult Management and Appointing (CAMO)
- Product Line Review

Revised Financing Overview

Prospective Payment System

- **Goal 1:** Provide Care of your Prime Enrollees
 - In-house vs. “make vs. buy” to Private Sector
 - MTF responsible for all PRIME care rendered in both direct care and private sector
- **Goal 2:** Earn Revenue on Fee for Service (FFS) Basis
 - Other MTFs’ Enrollees, Space-A (Active duty and other), Tricare Plus and TRICARE for Life, and MCSC (new)
- **Bottom-line:** We need to take care of our enrollees and meet our business plan targets; Focus on Customer Satisfaction, Access to Care, Productivity, and Data Quality

Business Plan Overview

Actual **59 MDW** Performance Oct-Jul 04

RVUs	IHC	Other DC	PC	Total PRIME	Other Enr	SA AD	SA NAD	Plus	Total FFS
Actual	256,130	16,071	55,388	327,589	79,986	72,278	48,866	104,149	305,279
Target	286,272	25,624	44,248	356,144	94,336	110,488	95,384	74,136	374,344
Diff	(30,142)	(9,553)	11,140	(28,555)	(14,350)	(38,210)	(46,518)	30,013	(69,065)
% Met	89%	63%	125%	22%	77%	44%	109%	140%	82%

RWPs	IHC	Other DC	PC	Total PRIME	Other Enr	SA AD	SA NAD	Plus	Total FFS
Actual	2,633	225	344	3,202	1,854	290	3,262	2,877	8,283
Target	2,856	280	368	3,504	2,088	440	4,864	2,072	9,464
Difference	(223)	(55)	(24)	(302)	(234)	(150)	(1,602)	805	(1,181)
% Met	92%	80%	93%	91%	89%	66%	67%	139%	88%

 Bottom-line: -\$9.4M

Source: P2R2 Virtual Analyst website

- Performance against targets seen differently for PRIME & FFS patients
- FY04 Targets based on FY02 LOE with no adjustments
- FY05: 25% "At Risk"; FY06: 50%...

SA-MM Overview

Goals & Objectives

- San Antonio Multi-Service Market (SA-MM) consists of WHMC, BAMC, Randolph Clinic, and Brooks Clinic
- Goals: Achieve the following desired end states
 - Optimize efficiency between direct and purchased care markets
 - Eliminate duplicate services
 - Increase synergy and cooperation among San Antonio MTFs
 - Ensure patient satisfaction with access and quality service
 - Strengthen Readiness by allocating the appropriate mix of resources
- Objectives
 - Optimize provider mix across specialty lines
 - Move providers and add facility capacity to meet population demands
 - Conduct rigorous business planning for clinical service lines
 - Optimize Third Party Billing, Contracting and Pharmacy
 - Establish a SA-MM Consult, Appointment and Management Office

CAMO Benefits

- Recapture Prime Leakage through more effective utilization of Market resources
- Provide “Entire Market” approach to appointment and referral processes
- Eliminates competition between MTFs and encourages cooperation
 - Encourages consolidation of clinical service lines
 - Facilitates GME (free movement of patients and staff between MTFs)
- Provides single POC for coordination between Purchased Care System and MTFs on referrals

Radiology

Product Line Analysis

- Clinic Description
- Manpower and Staffing
- Readiness/Mobility Taskings
- Access to Care
- Workload over Time
- Purchased Care
- Coding
- Business Plan Implications
- Third Party Collections

Radiology

Clinic Description

- Diagnostic Imaging and Nuclear Medicine
 - 200+K exams annually
 - 180K in house and 25K teleradiology
 - Teleradiology: Randolph, Goodfellow, Moody, Shaw, Brooks, Robins AFB's + Reid and Kelly Clinics
 - McConnell AFB soon to be added
- Equipment valued in excess of \$32M
 - 64% of 59 MDW investment equipment
- Flights: Diagnostic Imaging (includes Interventional Radiology), Nuclear Medicine, and Medical Physics

Diagnostic Imaging Flight Description

- Plain Radiography/Fluoroscopy *
 - 8 suites main radiology
 - 2 suites each in Ortho, Reid and Kelly
 - 1 suite ED
- Mammography: 3 units + 1 biopsy table
- Ultrasound: 6 suites **
- CT: 3 scanners *
- MRI: 2 scanners **

* In house 24/7

** On call 24/7

Interventional and Neurointerventional Procedures

- On call 24/7
- 2 suites (1 currently renovated)
- *Emergent/urgent*: angiography including stent/coil placement, drainage catheters
- *Routine*: central catheters, angiography including stents and coil/embolization
- New neurointerventional services

Nuclear Medicine Flight Description

- Procedures/studies: 9,800/yr
 - Emergency Services Support
 - Cardiology Support (4,000 studies/yr)
 - Sole Pediatric Support for WHMC/BAMC
 - PET – averaging 8/week
 - I-131 Rx for Thyroid Malignancy & Graves Disease
- On Call 24/7

Medical Physics Flight Description

- Satisfy Multiple Regulatory Requirements
 - AF Instructions - FDA/MQSA - NRC
 - NCRP/ICRP Recommendations
 - JCAHO Guidelines and ACR Standards
- Radiology Residents Physics Education
- USAF/DoD Medical Physics Consultants
 - Mammography, CT, MRI, X-ray, Teleradiology
Fetal Dosimetry, Nuclear Medicine, PACS
- Radiation Contamination Control Team
- Radiation Safety Officer: on call 24/7

Diagnostic Radiology GME Responsibilities

- Diagnostic Radiology Residency - 1 of 2 in AFMS (Travis)
 - Length: 4 years
 - Number residents: 37 (combined program w/BAMC)
 - # AF Starts: 4-6 per year
 - On-time Graduation rate: 100%
 - First time board pass rate: 81%
 - 5-year Accreditation 2001; Next in Apr 06
 - Potential problem area: marginal training in Vascular/Interventional Radiology

Vascular/Interventional Fellowship GME Responsibilities

- Interventional Fellowship – only one in AFMS
 - Length: 1 year
 - Number fellows: 1
 - On-time Graduation rate: 100%
 - First time board pass rate: 100%
 - 5-year Accreditation: October 2006
 - Potential problem area: marginal training in diagnostic and therapeutic angiographic procedures at WHMC
 - Solution: Fellow rotates to VA in San Antonio and UTHSCSA
 - Readiness impact: new change to UTC FFRAD will require 10 specialists in AFMS (currently only 4)

Nuclear Medicine Fellowship GME Responsibilities

- Nuclear Medicine Fellowship – only one in AFMS
 - Length: 1 year
 - Number fellows: 1
 - On-time Graduation rate: 100%
 - First time board pass rate: 100%
 - 5-year Accreditation 2003; Next in 2008
 - Potential problem area: Manning shortfall in Nuclear Medicine due to 2 yrs with no fills

Radiology

Phase II Training Programs

Summary

	DI	NUC	US	Mammo
Didactic Training Length	40 Weeks	32 Weeks	16 Weeks	2 Weeks
Capacity	30	7	4	2
On-time Graduation Rate	100%	100%	100%	100%
Accreditation Length/Year	2-year in CY03	2-year in CY03	2-year in CY03	2-year in CY03
Next Accreditation	CY05	CY05	CY05	CY05
Potential Problems	Classroom & counseling space limitations	Probation Review due to manning and deployments	Shortage of Qualified Instructors; Space Limitations	None
Remarks	Largest Phase II Program		Produces most students of 8 programs	Newest Program

Diagnostic Imaging Flight Staffing

	Authorized					Assigned				
	Mil	GS Civ	K	Total		Mil	GS Civ	Contract	Total	Staffing
44R3 (MD)	19	0	2	21		17	0	2	19	90%
RNs (46N3)	0	2	1	3		0	2	1	3	100%
Techs	92	11	0	103		77	9	9	95	92%
Admin (4A0X1)	1	19	0	20		1	0	18	19	95%
Total Support Staff										

19 Physicians

Col Lisanti

Maj

Dalrymple

Col Dykes

Maj

Duffy

Lt Col Condie

Maj Fults-Ganey

Lt Col Markel

Maj Grayson

Lt Col Rautiola

Maj Leon

Lt Col Sorge

Maj Raiken

Lt Col Sundell

Maj Urban

Lt Col White

Capt Church

Dr Fox

Capt

MAPPG06 Projection:
Reduction 10 Enlisted
Reduction 1 GS
Increase 1 Officer
No change
Contractors

Interventional Radiology

(Numbers taken out of Diagnostic Imaging)

	Authorized					Assigned				
	Mil	GS Civ	K	Total		Mil	GS Civ	Contract	Total	Staffing
44R3B	3	0	0	3		2	0	0	2	66%
46N3	0	1	0	1		0	4	0	4	100%
LVN (matrix from surgery)	0	0	0	0		0	1	0	1	100%
4R051	5	0	0	0		5	0	0	5	100%
Total Support Staff	8	1	0	9		7	5	0	12	100%

2 Physicians

Lt Col Condie

Maj Leon

(Projected summer 05: Lt Col Seay)

3 overhire 46N3's

Nuclear Medicine Flight Staffing

	Authorized					Assigned				
	Mil	GS Civ	K	Total		Mil	GS Civ	Contract	Total	Staffing
44H3	1	0	0	1		2	0	0	2	200%
44R3D	1	0	0	1		1	0	0	1	100%
43P3 (matrix from pharmacy)	1	0	0	1		0	1	0	1	100%
4A031	0	1	0	1		0	1	0	1	100%
4R0xx	9	0	0	9		9	0	0	9	100%
Total Support Staff										
3 Physicians										

Col Morrison (retires Dec 05)
Maj Duffy
Maj Zhang

Medical Physics Flight Staffing

	Authorized					Assigned				
	Mil	GS Civ	K	Total		Mil	GS Civ	Contract	Total	Staffing
43Y3	4	1	0	5		4	1	0	5	100%
4A071	0	1	0	1		0	1	0	1	100%
4B051	0	1	0	1		0	0	0	0	0%
4R051	3	2	0	5		3	2	0	5	100%
Total Support Staff										

5 Physicists

Dr Elmore

Maj Hernandez

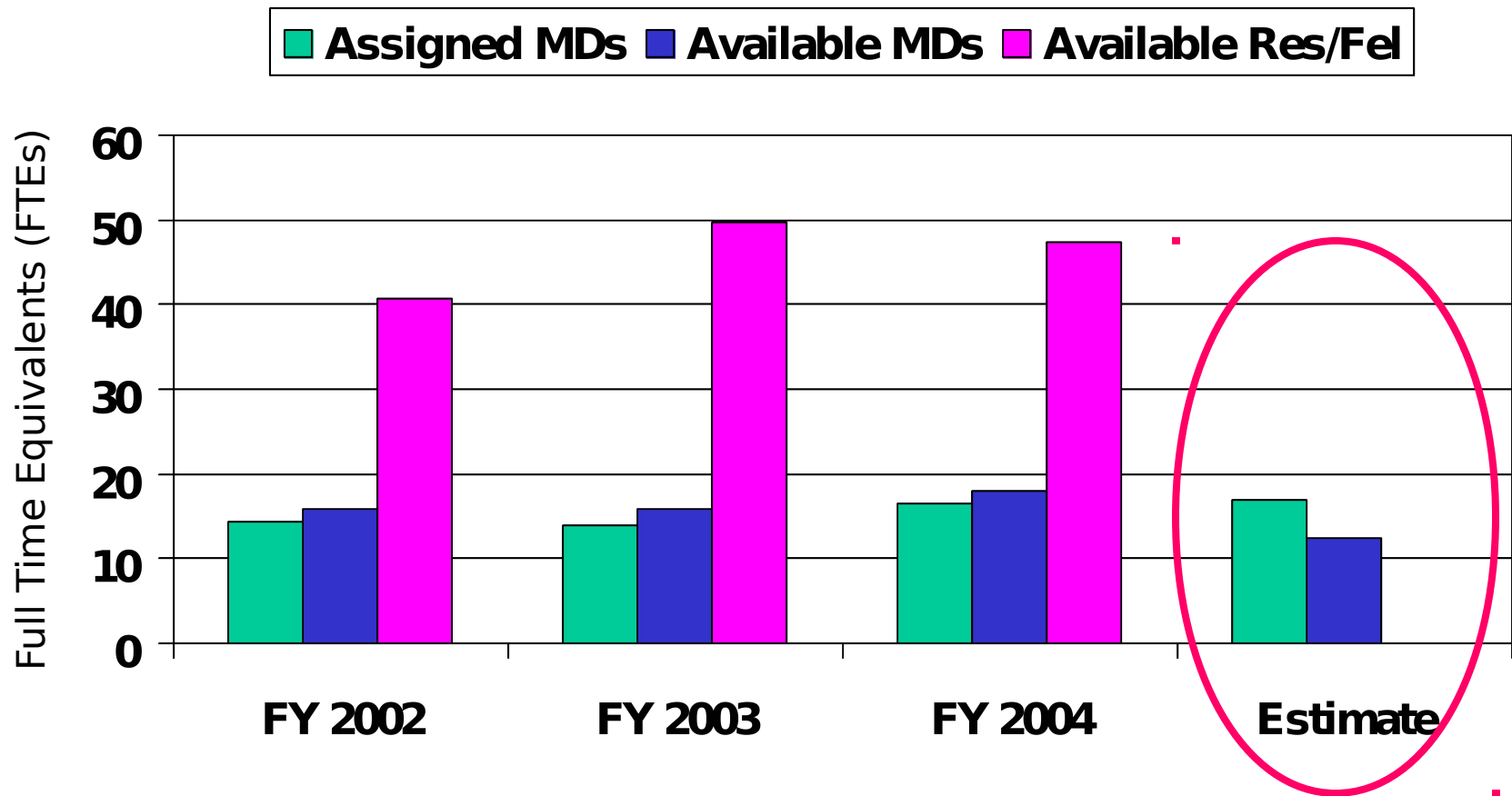
Capt Silverstrim

Lt Danley

Lt Sutton

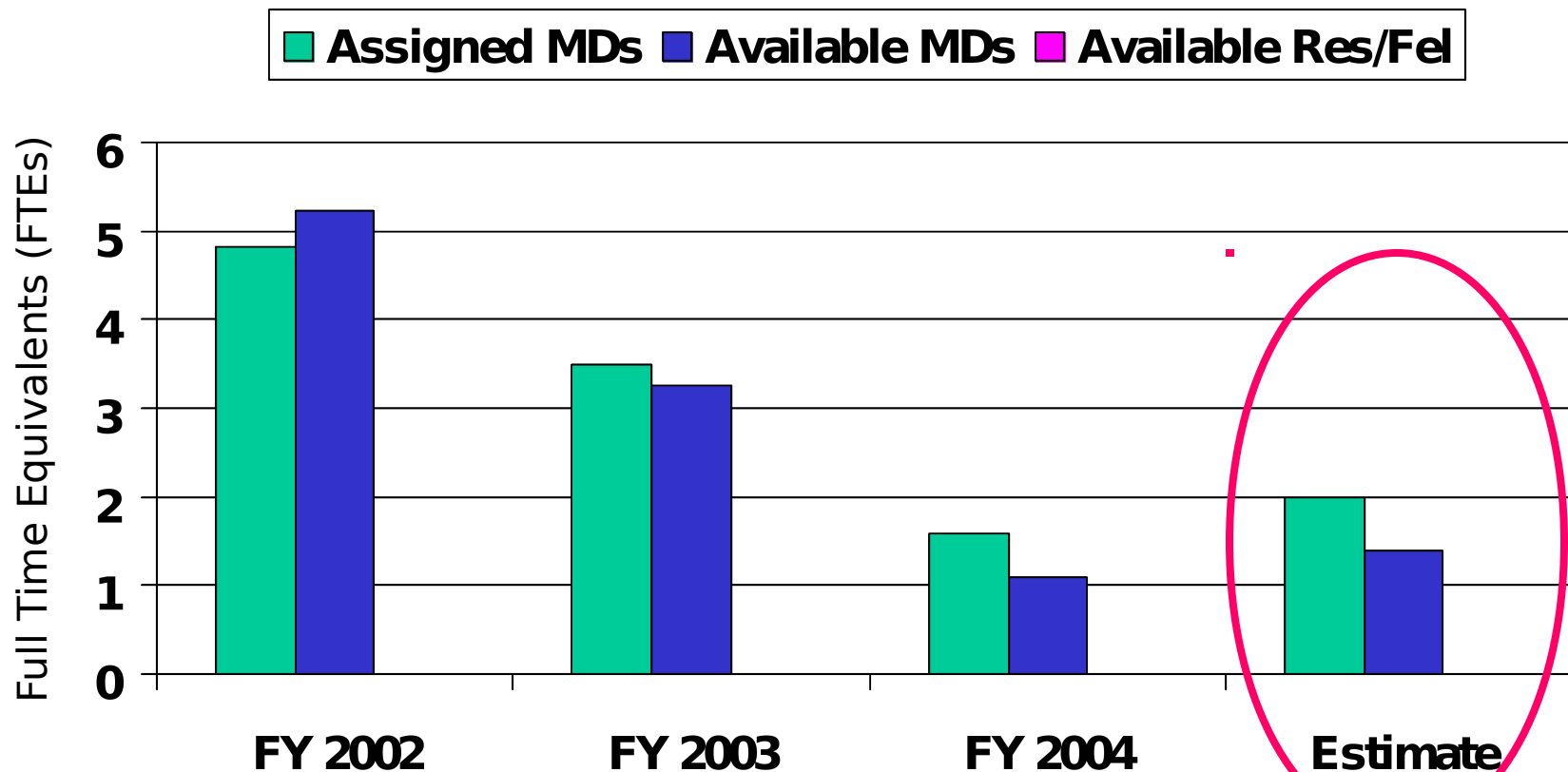
Diagnostic Radiology

Assigned/Available MDs (MEPRS)



• MEPRS data looks very clean

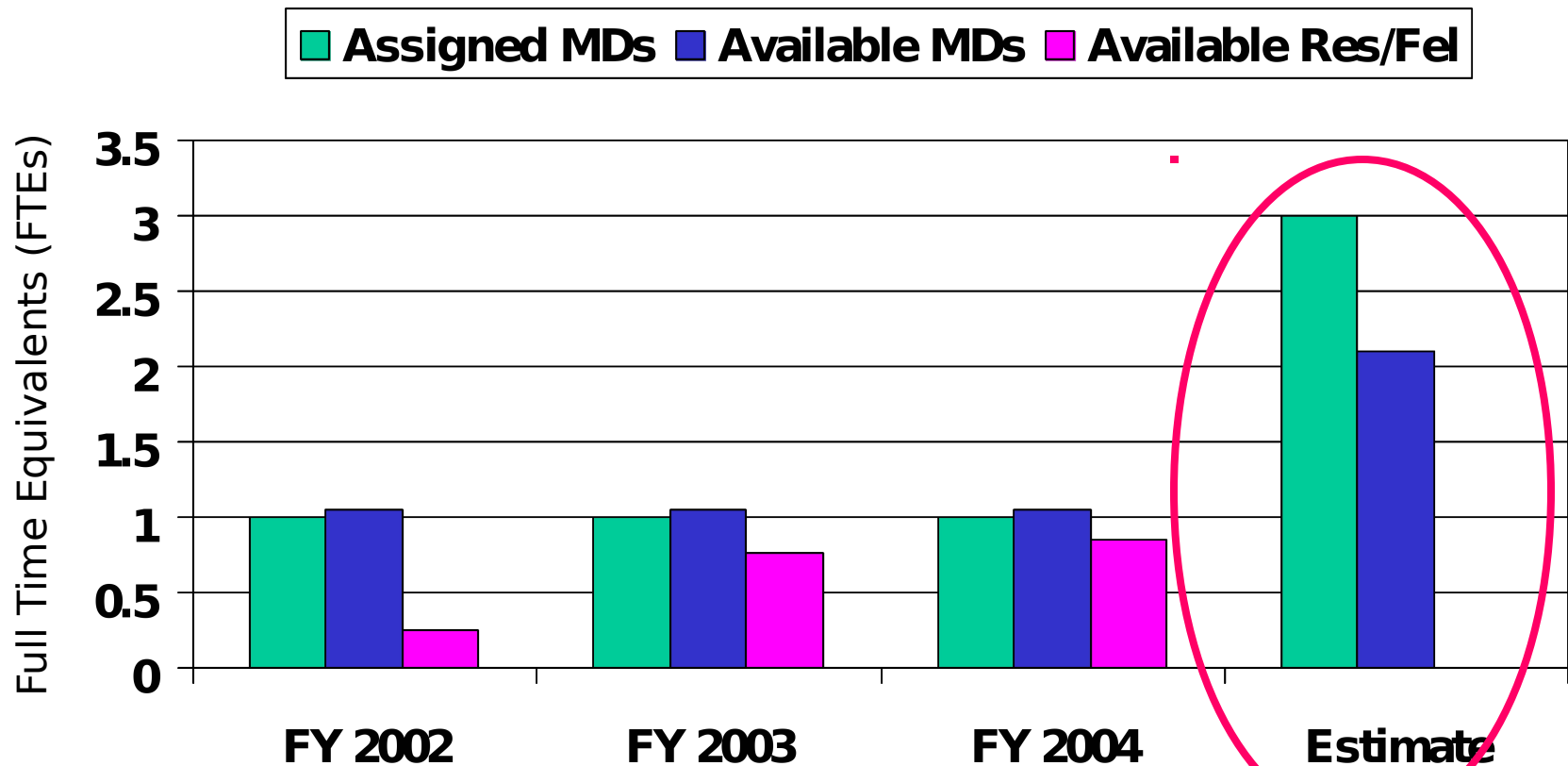
Interventional Radiology Assigned/Available MDs (MEPRS)



• MEPRS Data looks very clean

Nuclear Medicine

Assigned/Available MDs (MEPRS)



• Unclear if 3 assigned physicians
Counted elsewhere (Duffy)

Radiology

Mobility and Other Deployments

- Taskings in Turtle Model: As 44R3
 - FFANC (Ancillary Aug): 1 in 5/6 and 1 in 9/10
 - 1 projected in FY05 = 120 days
 - FFHA4 (CT Scan Team): 1 in 3 / 4
 - 1 projected in FY05 = 120 days
 - FFRAD (Rad Aug): 1 in 1 / 2 and 1 9 / 10
 - 1 projected in FY05 = 120 days
- Physician Deployments
 - FY03: Maj Lepage (94 day TDY Qatar, 100%)
 - FY04: Col Rautiola (132 day TDY Qatar, 100%); Maj Grayson (96 day Qatar, 100%); LtCol Raiken (92 day Qatar, 100%)
 - FY05: LtCol Markel (131 Day Balad, 33%); Maj Fults-Gainey (111 Day Balad, current); Maj Duffy (120 day Balad, projected)
- Humanitarian and Civic Assistance
 - FY 04: Maj Richardson, Randy 14 day TDY Chili

Radiology Technologist Mobility and Other Deployments

- FY03:
 - MSgt Buchanan, Larry 90 day TDY Qatar
 - MSgt Lazaga, Angelo 120 day TDY Saudi Arabia
 - SSgt Vaughan, James 90 day TDY Landstuhl
- FY04:
 - TSgt Wingo, Wesley 90 day TDY Qatar
 - MSgt Belcher, Kelvin 132 day TDY Tallil
 - SrA Laplume, Danielle 132 day TDY Tallil
 - MSgt Harrington, Gary 134 day TDY Tallil
 - SSgt Gonzales, Ryan 92 day TDY Qatar
 - MSgt Gaspard, Patricia 111day TDY Tallil
 - SrA Hudson, Trevor 90 day TDY Uzbekistan TCN duty

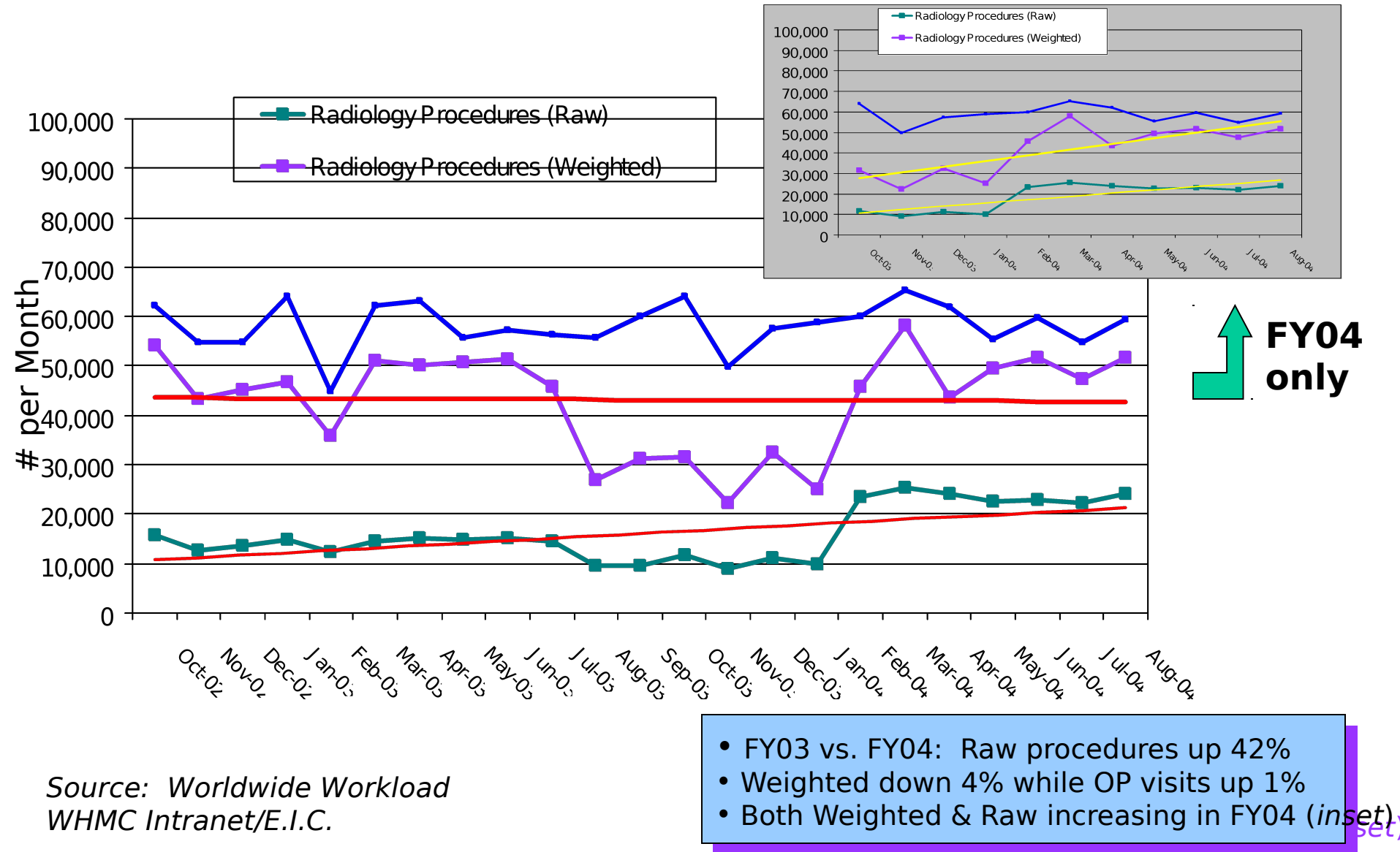
Radiology

Mobility and Other Deployments

- FY05:

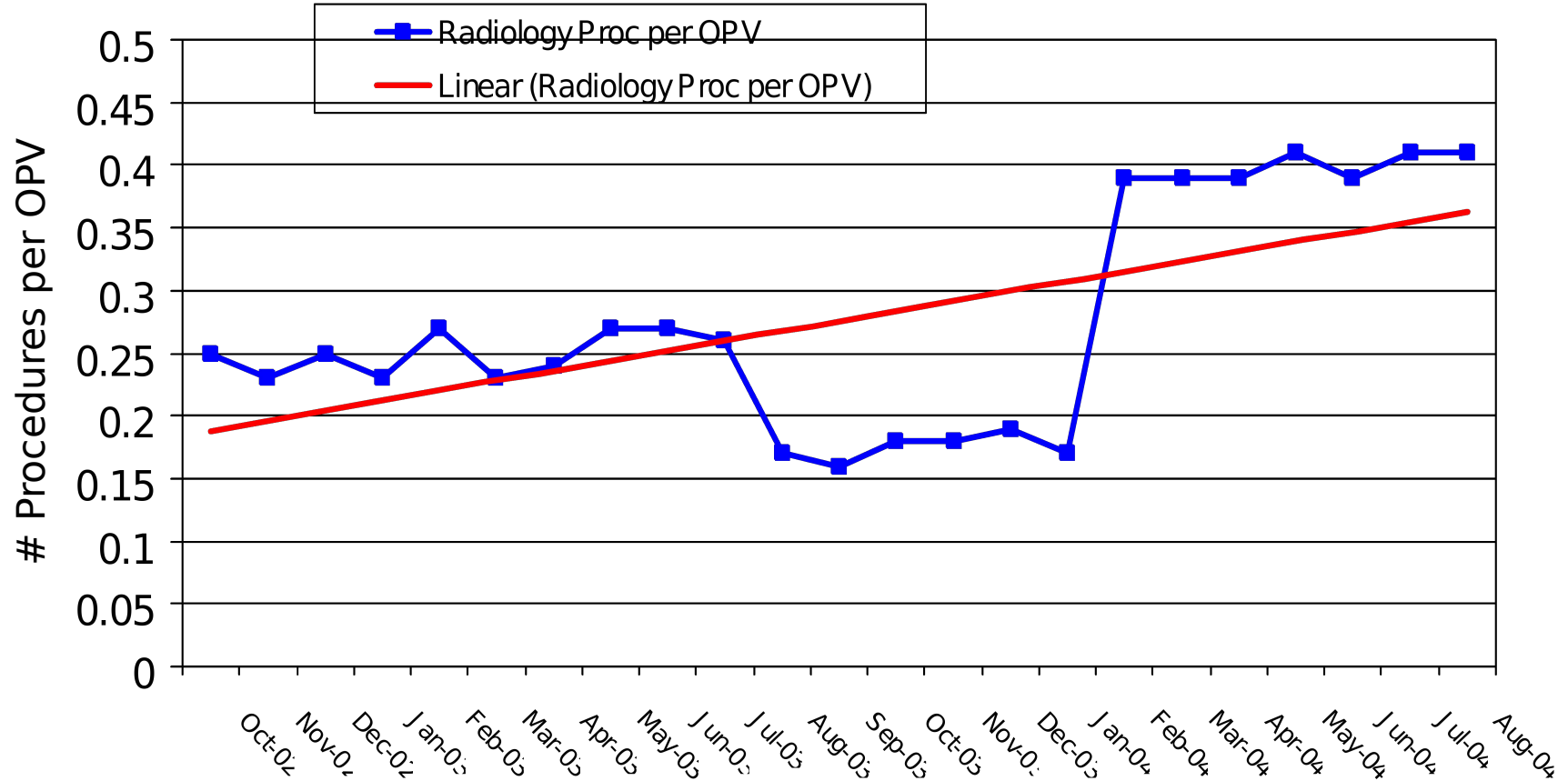
SSgt Brass, Vincent	131 day TDY Balad
SSgt Kevin, Hargrave	131 day TDY Balad
SrA Knowlton, Charles	131 day TDY Balad
TSgt Newhard, Billie Jo	120 day TDY Balad (current)
SSgt Cano, Amanda	120 day TDY Balad (current)
SrA Szasz, Jeffrey	120 day TDY Balad (current)
SrA Barnes, Jack (current)	120 day TDY Balad
TSgt Kyle Scafidi	60 day TDY Balad (current)
SSgt Roomsberg, Thomas (projected)	120 day TDY Balad
SSgt Sancho, Angela	120 day TDY Balad (projected)
SrA Depillars, Dominique (projected)	120 day TDY Balad
A1C Duarte, Mariefaye	120 day TDY TCN Duty (projected)

Diagnostic Imaging Procedures vs. Outpatient Visits FY03-04



Radiology

Total Procedures per OP Visit FY03-04

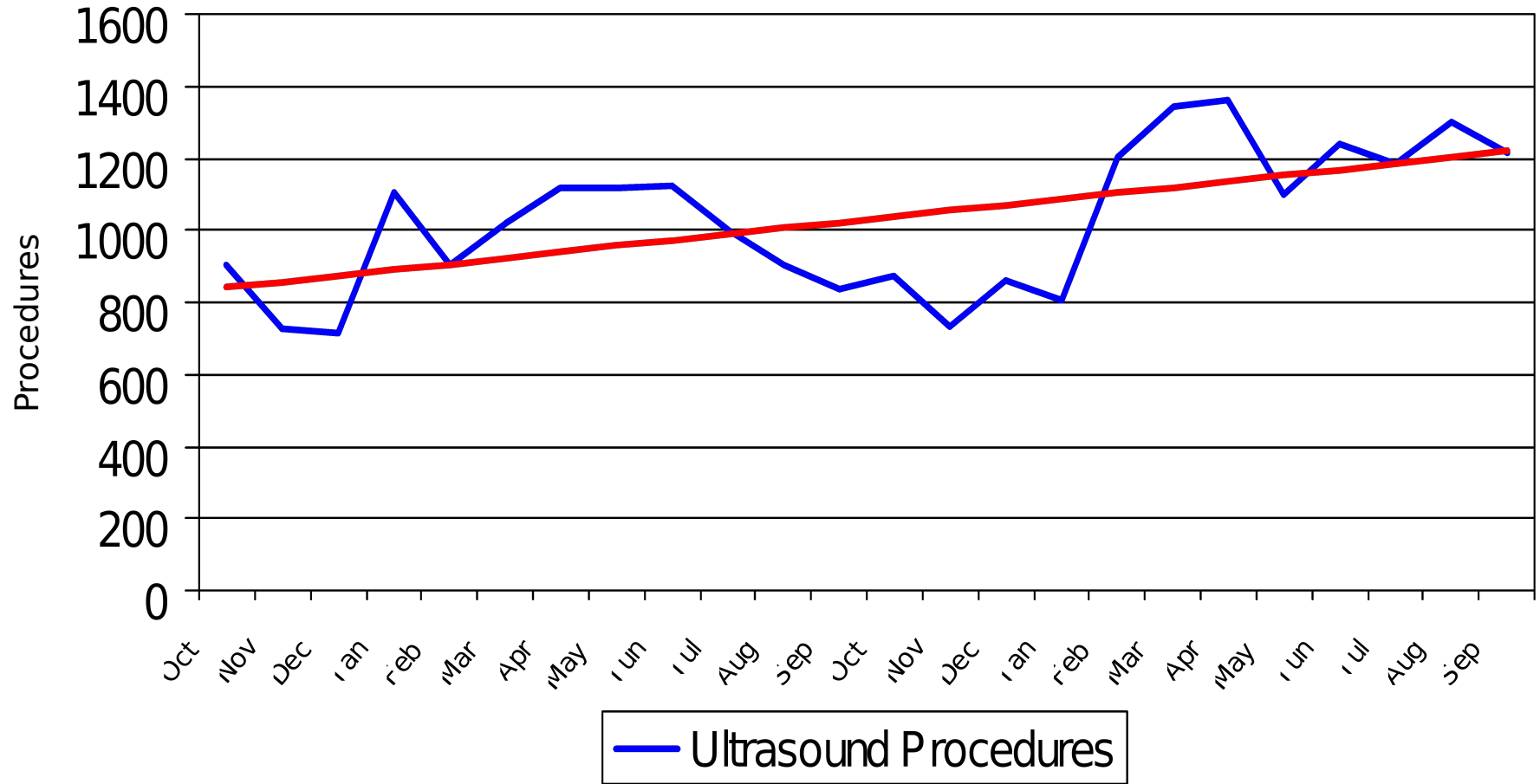


Source: Worldwide Workload
WHMC Intranet/E.I.C.

• Overall: up 38% in FY04

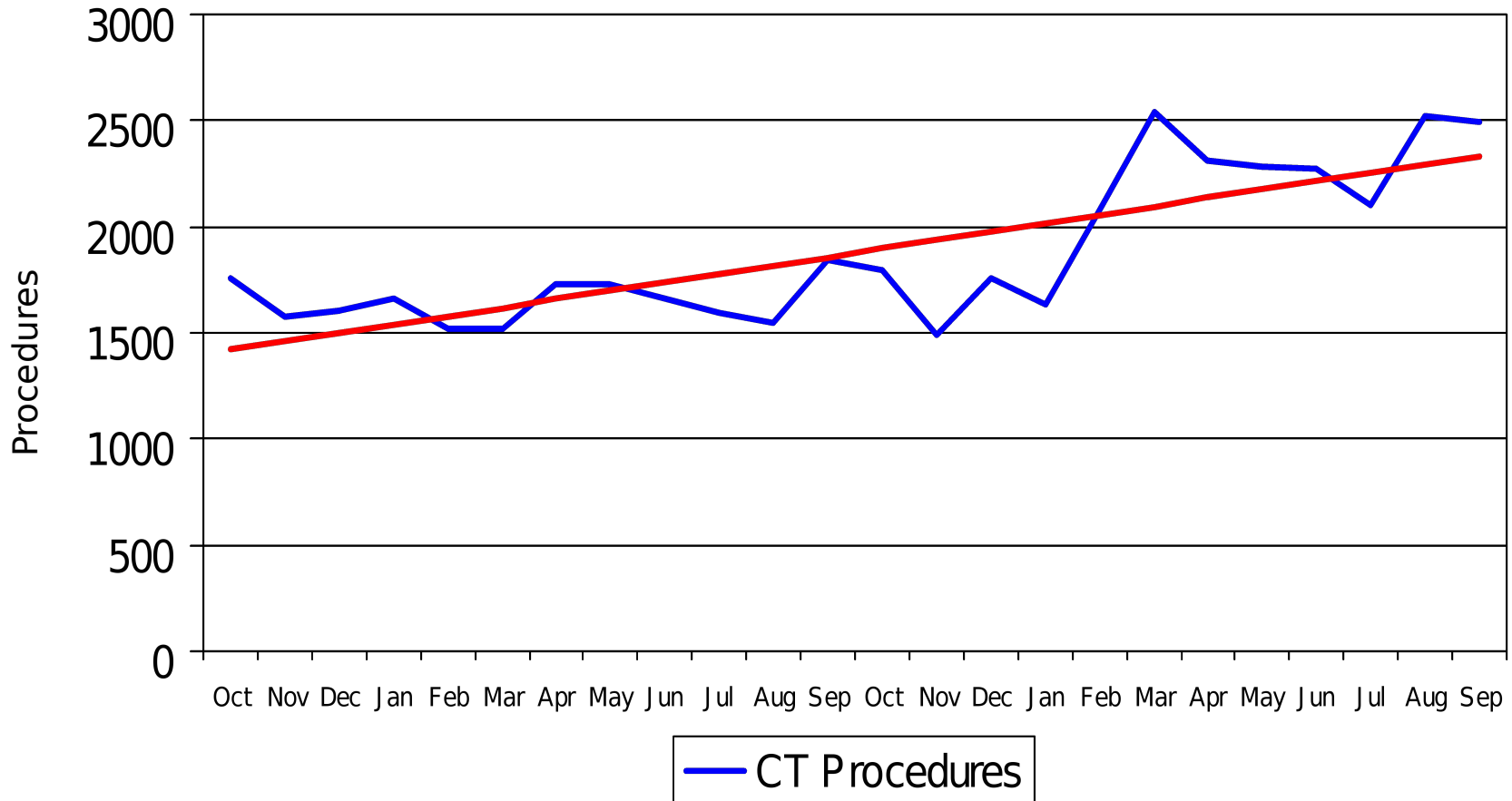
Ultrasound

FY03 - FY04



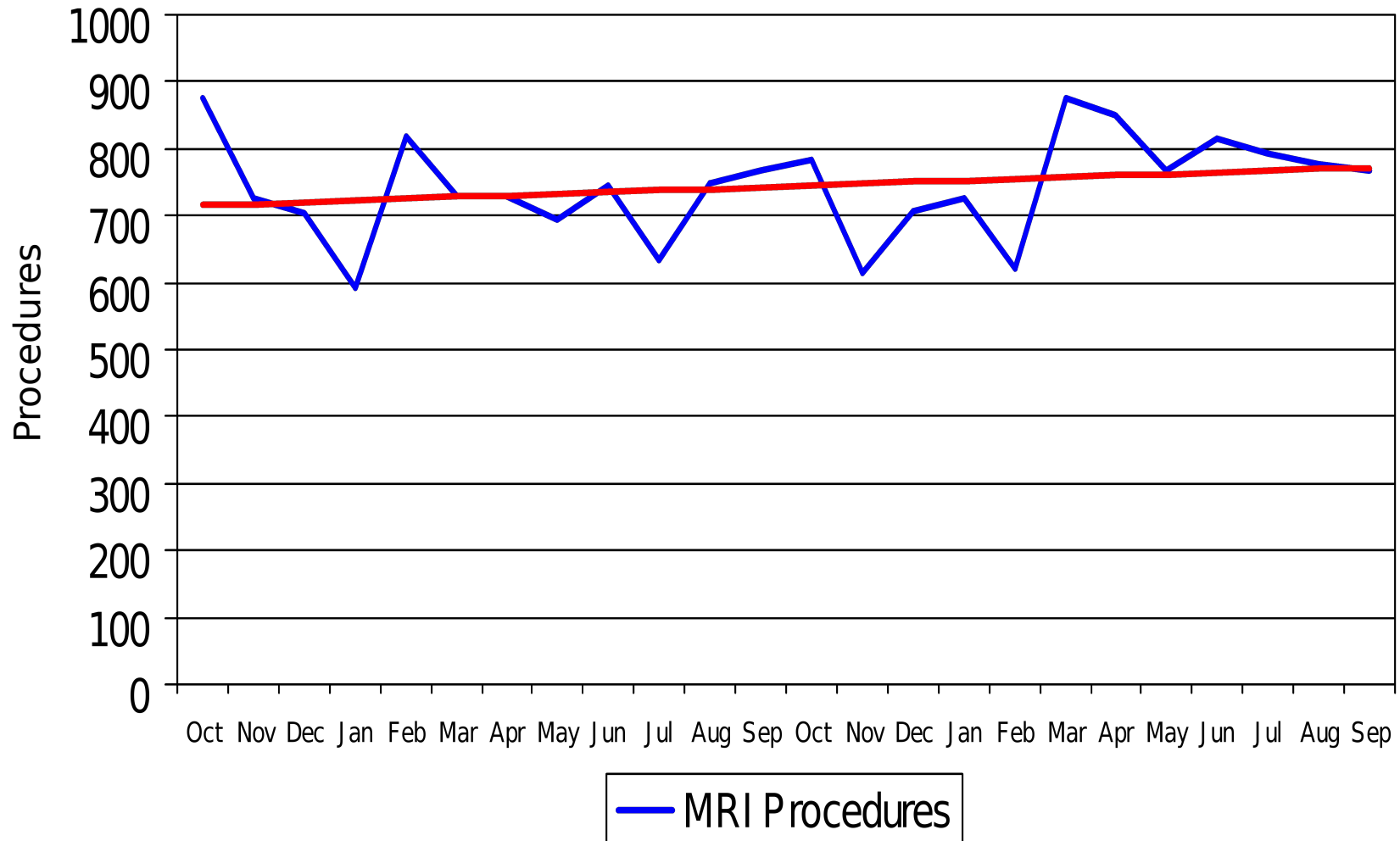
Computed Tomography (CT)

FY03 – FY04



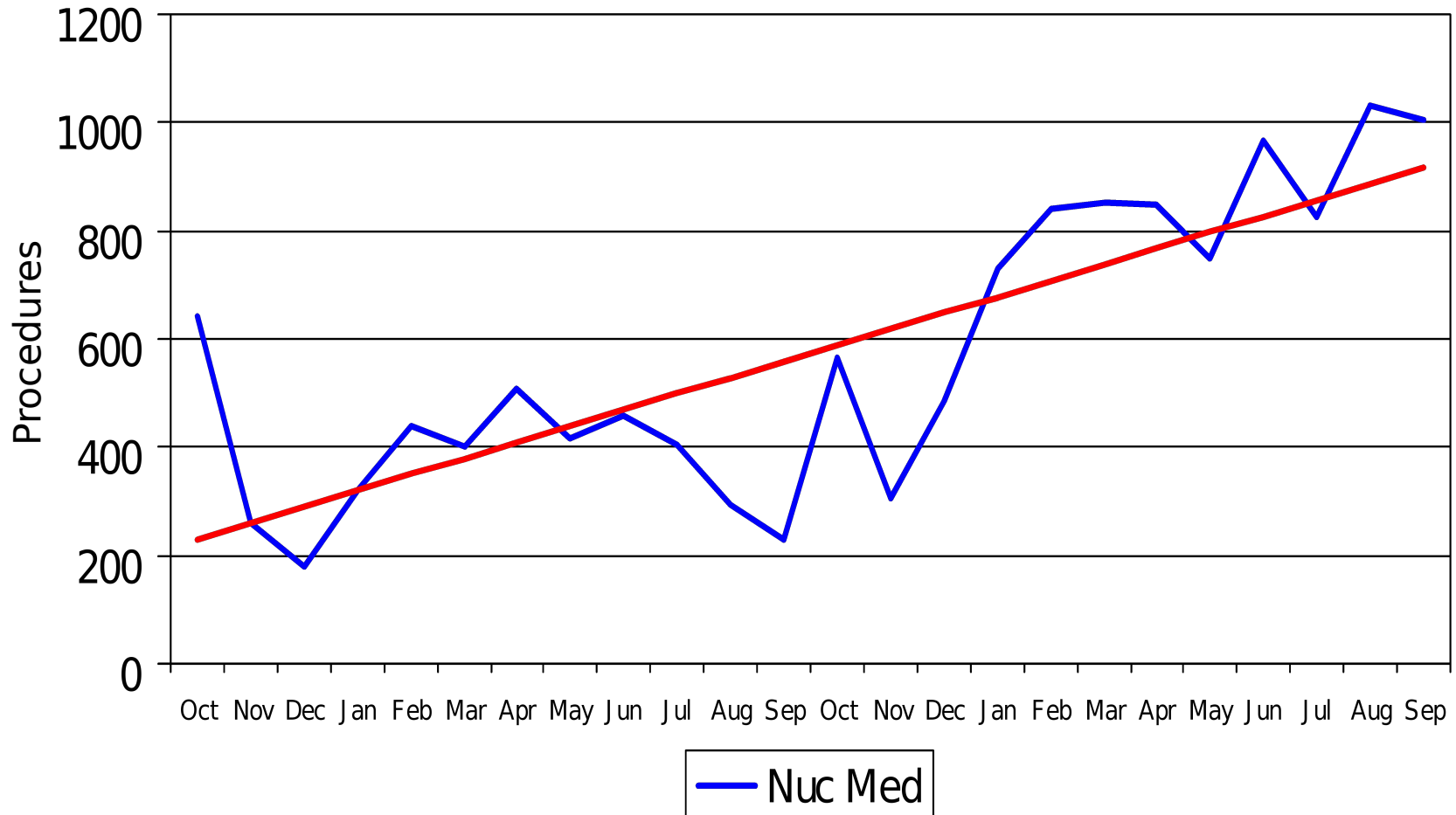
MRI

FY03 – FY04



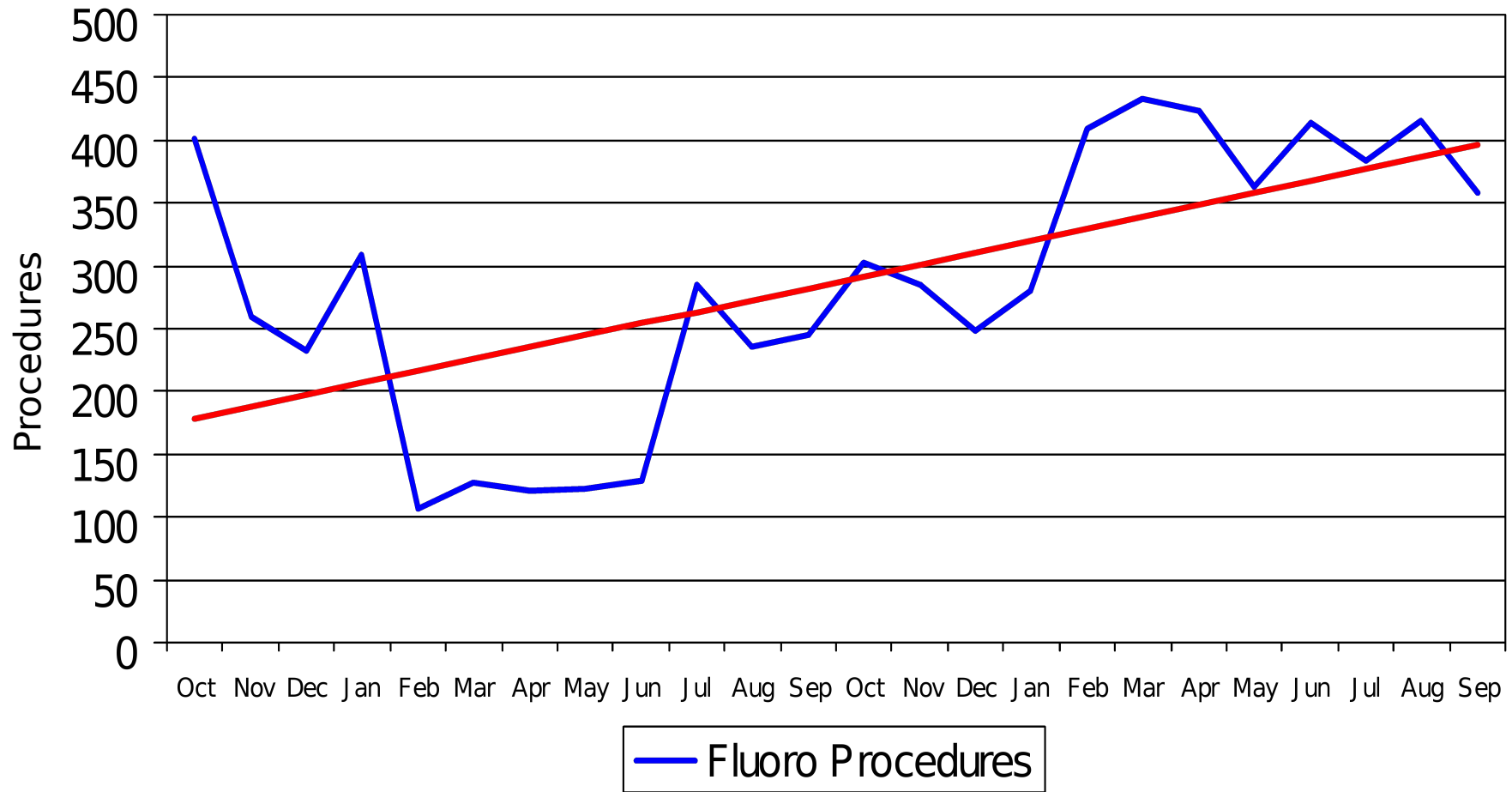
Nuclear Medicine

FY03 – FY04



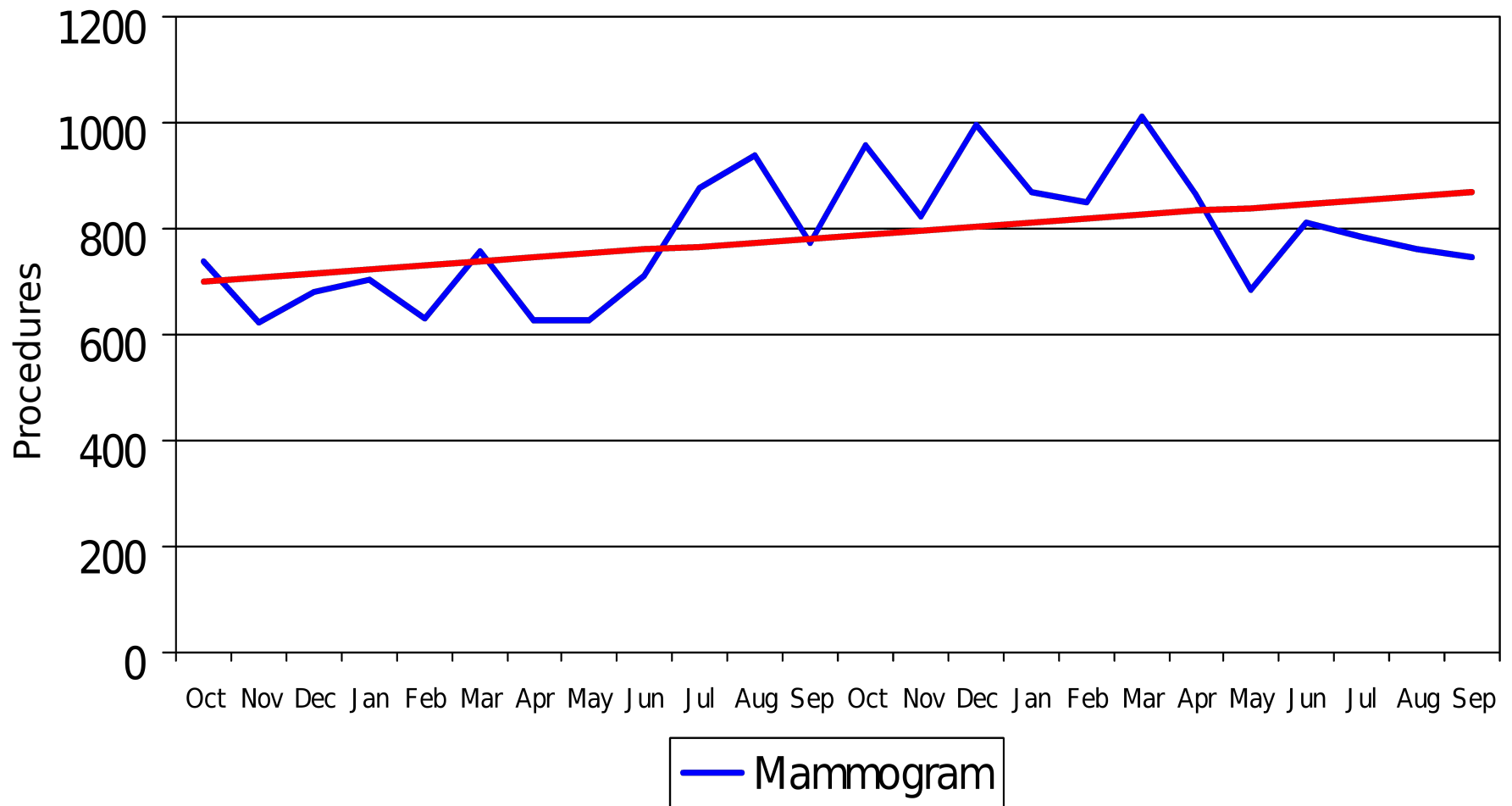
Fluoroscopy

FY03 – FY04



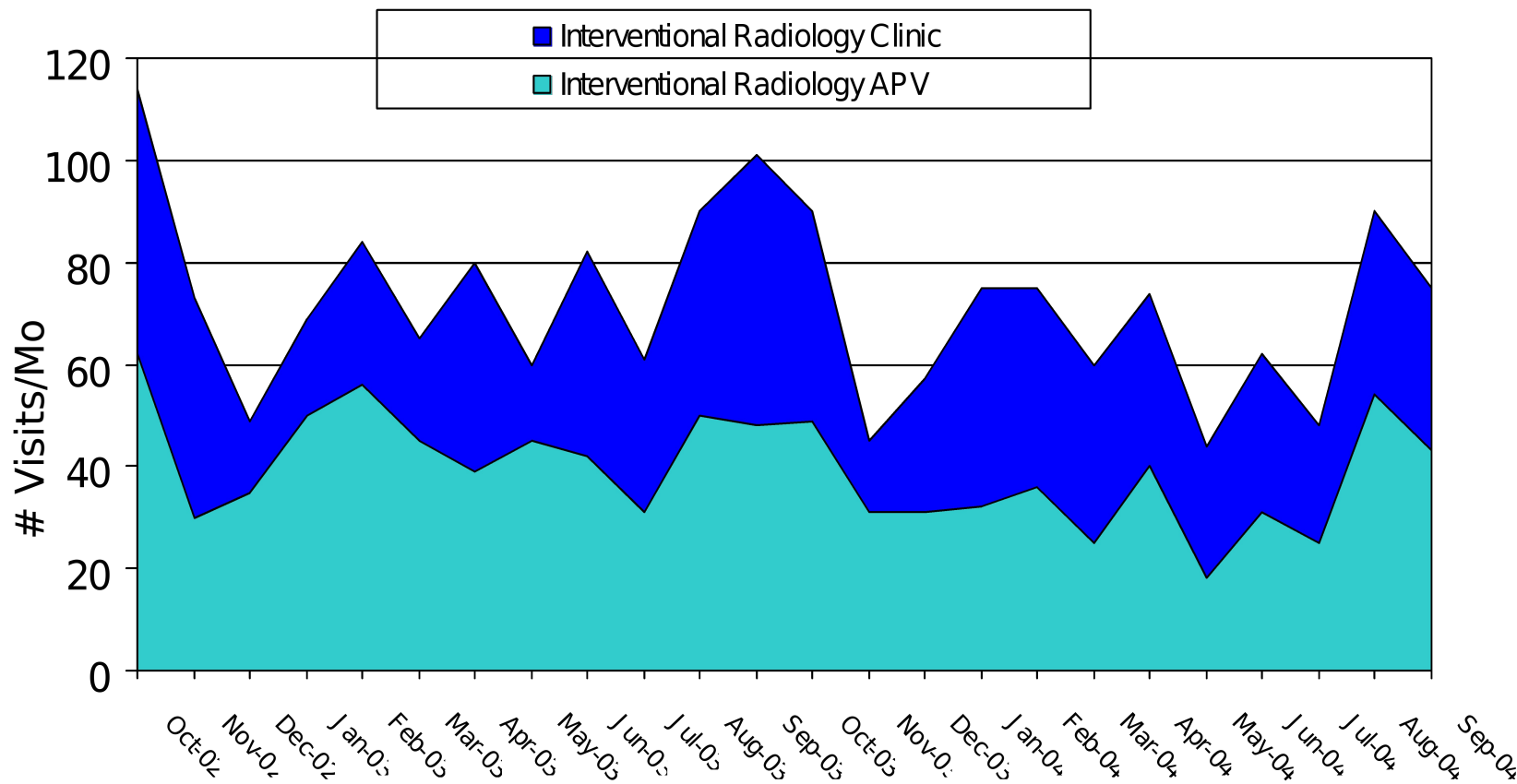
Mammogram

FY03 – FY04



Interventional Radiology

Total OP Visits by Type FY03-04

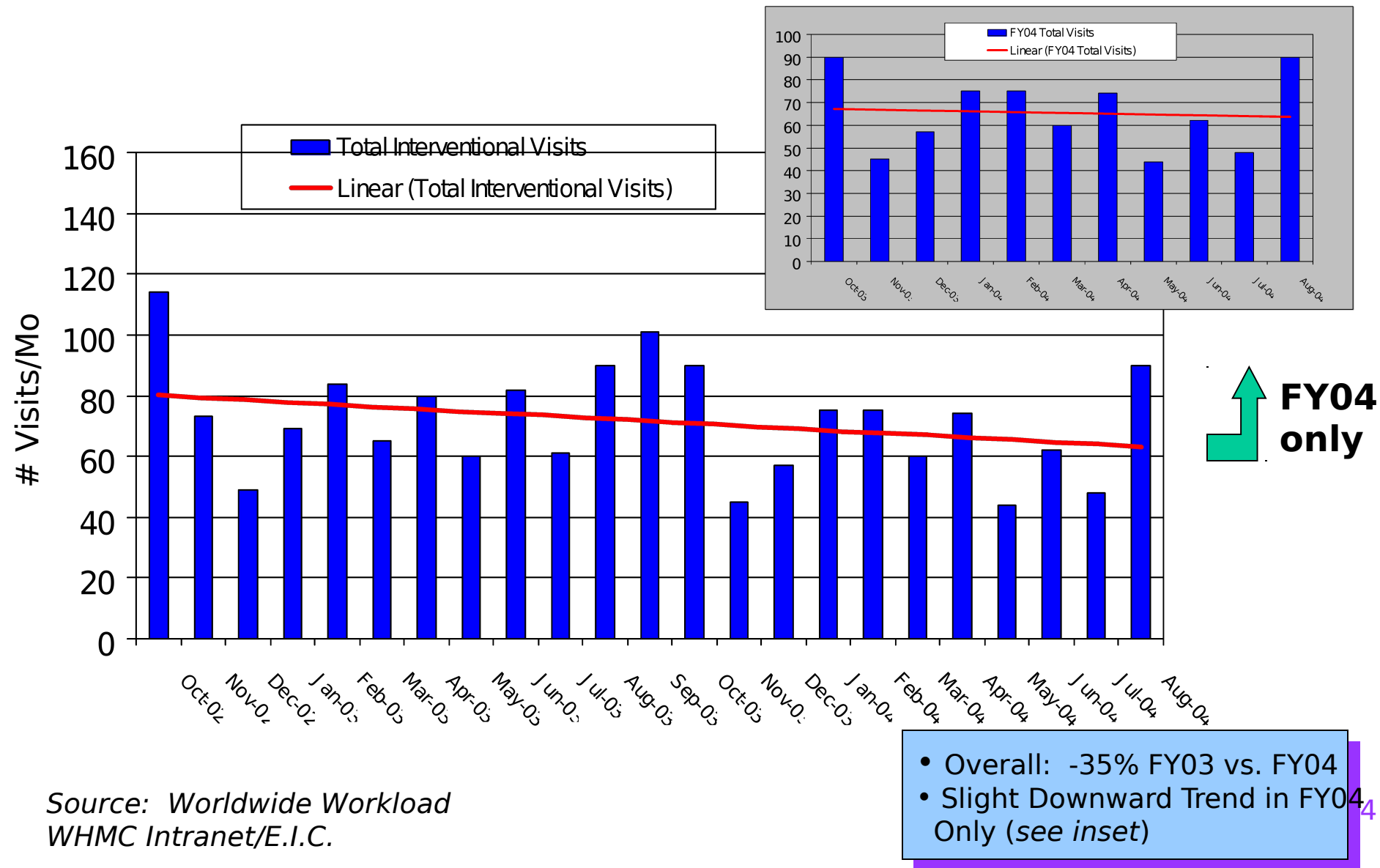


- FY03 Avg: 4 APVs/mo; 4.4 visits/mo
- FY04 Avg: 3.6 APVs/mo; 2.7 visits/mo
- Change: -12% APVs; -66% visits

Source: Worldwide Workload
WHMC Intranet/E.I.C.

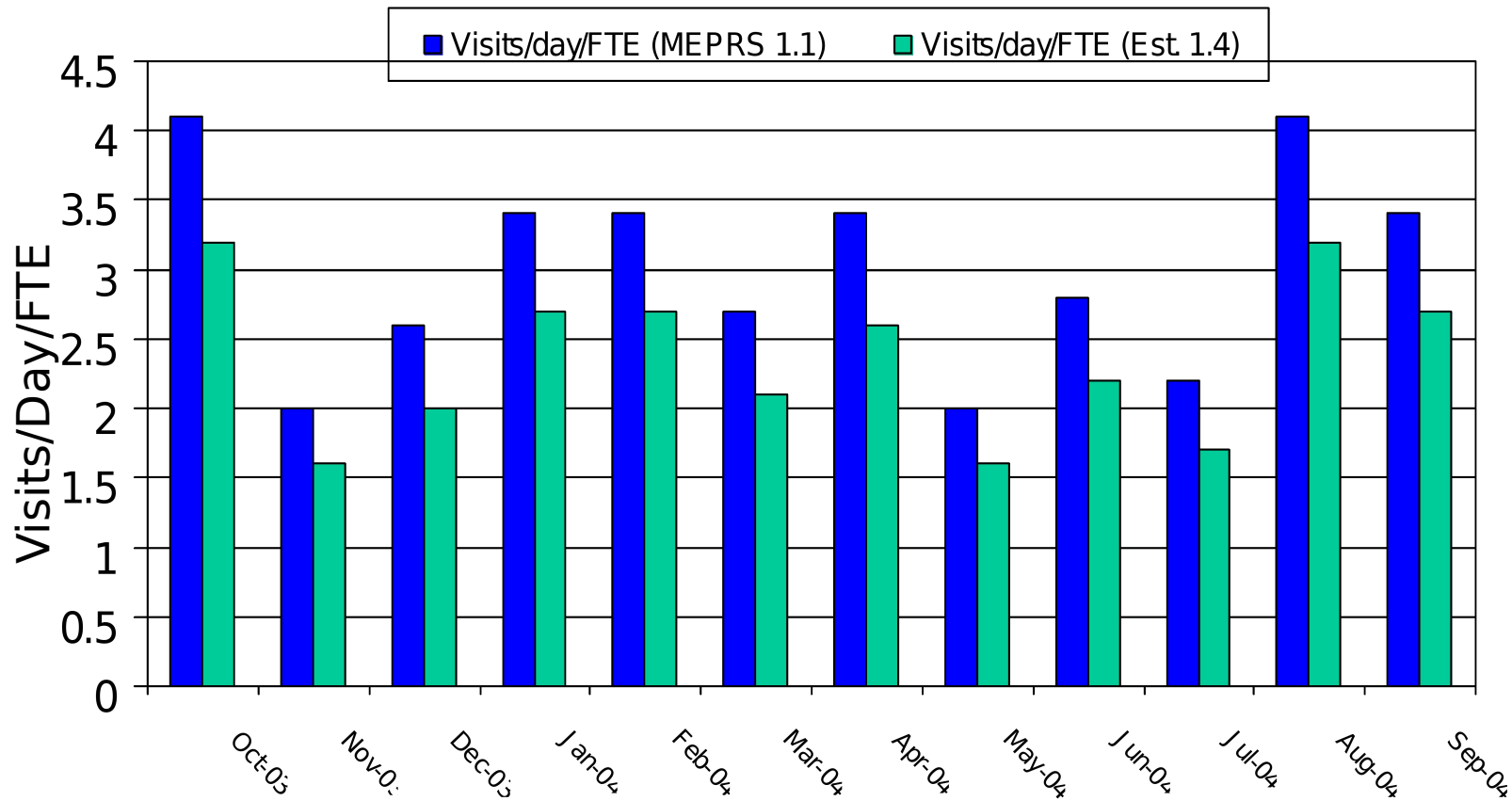
Interventional Radiology

Total OP Visits FY03-04



Interventional Radiology

Total OP Visits/Day/FTE



- Monthly x MEPRS Avail @ 20 days/mo
 - This is what Air Staff sees when they look at Visits divided by MEPRS available
- Estimate: 1.4 Avail

- MEPRS: 3 per day/FTE
- Estimate: 2.4 per day/FTE
- Ensure MEPRS corrected to give accurate picture of workload

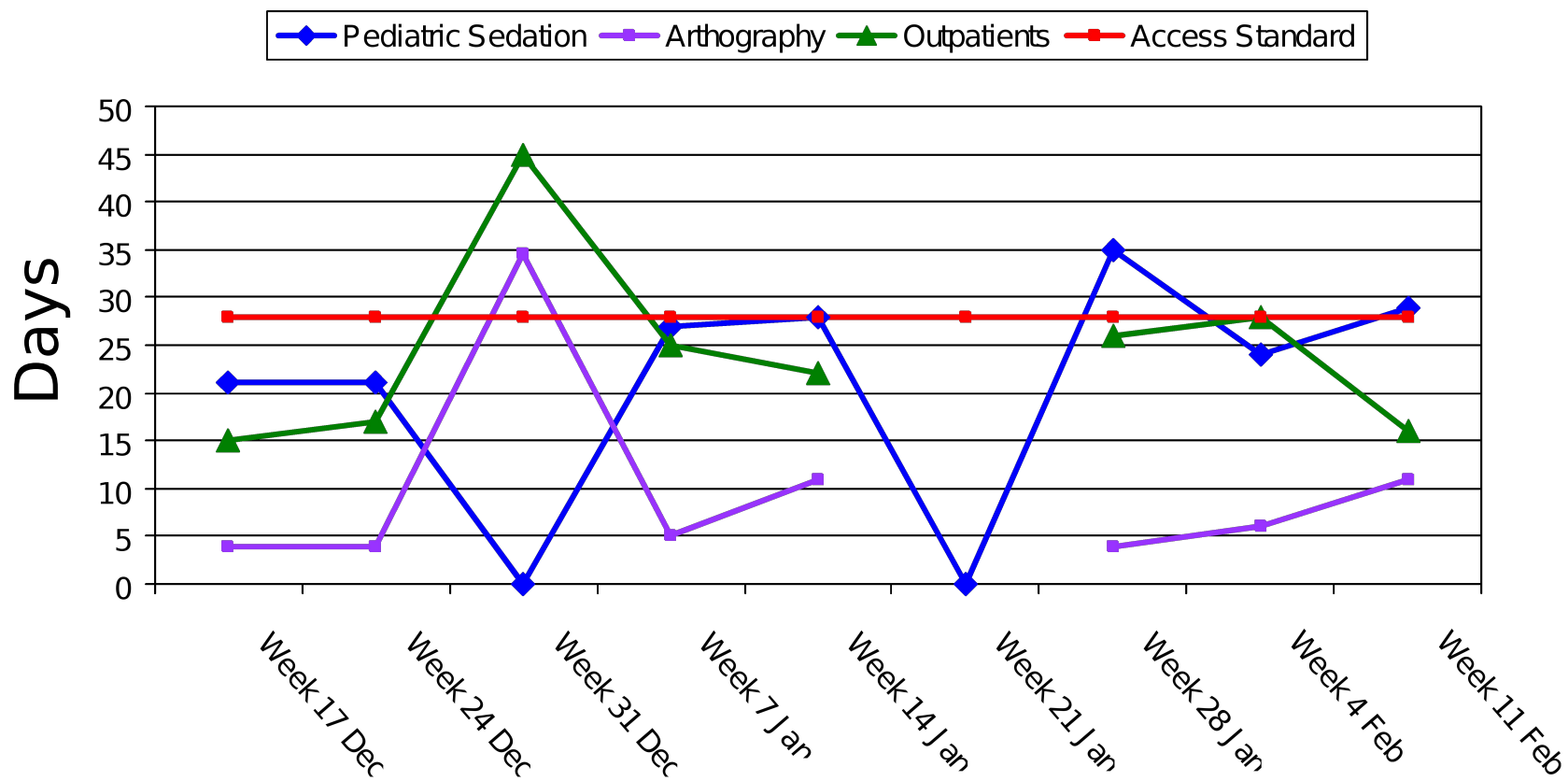
Interventional Radiology

Access to Care

- Standard for Specialty Appointments: 28 days
 - Avg Wait Time: 7.35 (as of Jan 05)

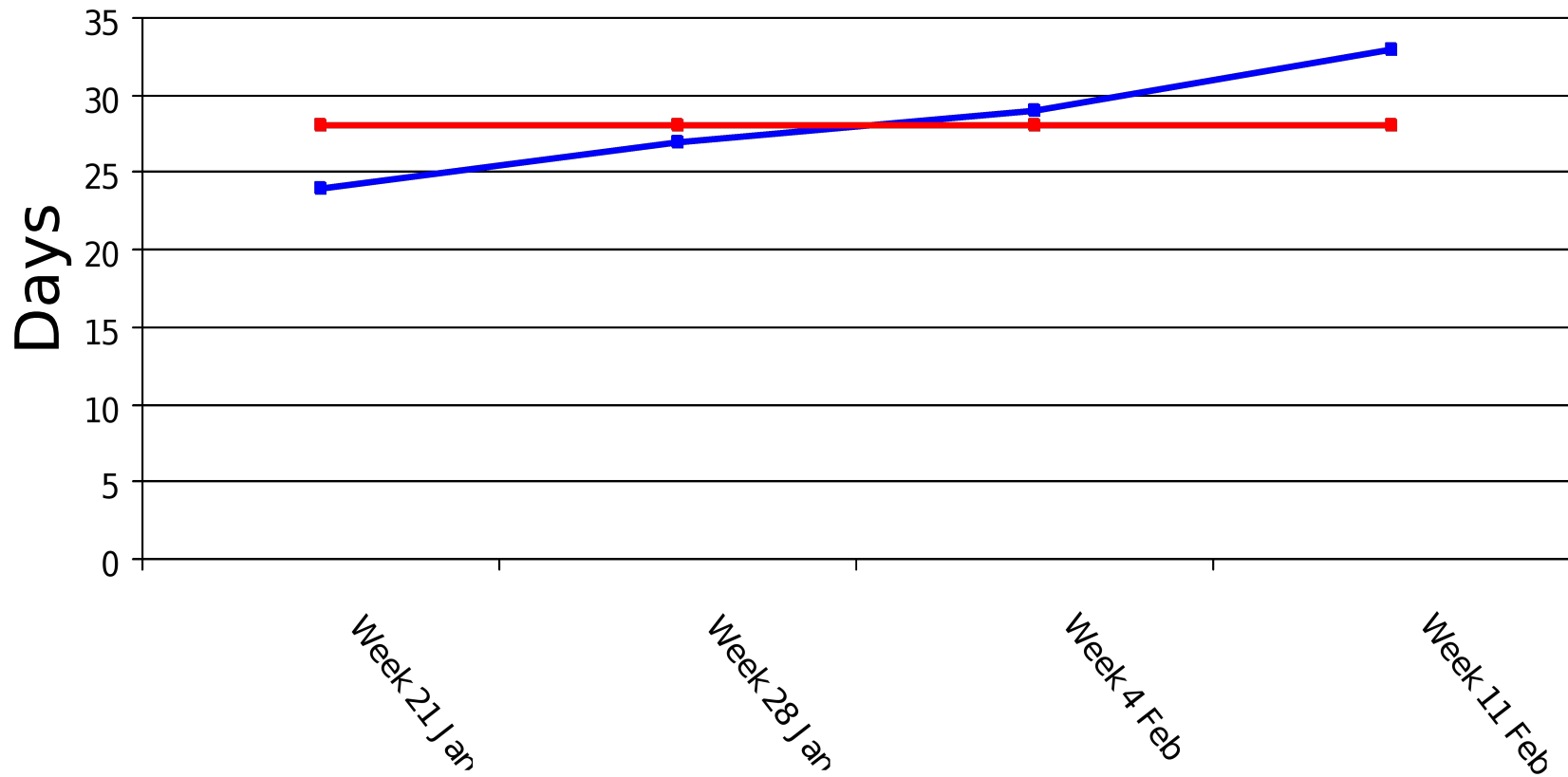
• **Meeting standard**
for routine access to
specialty care

Access to Care MRIs

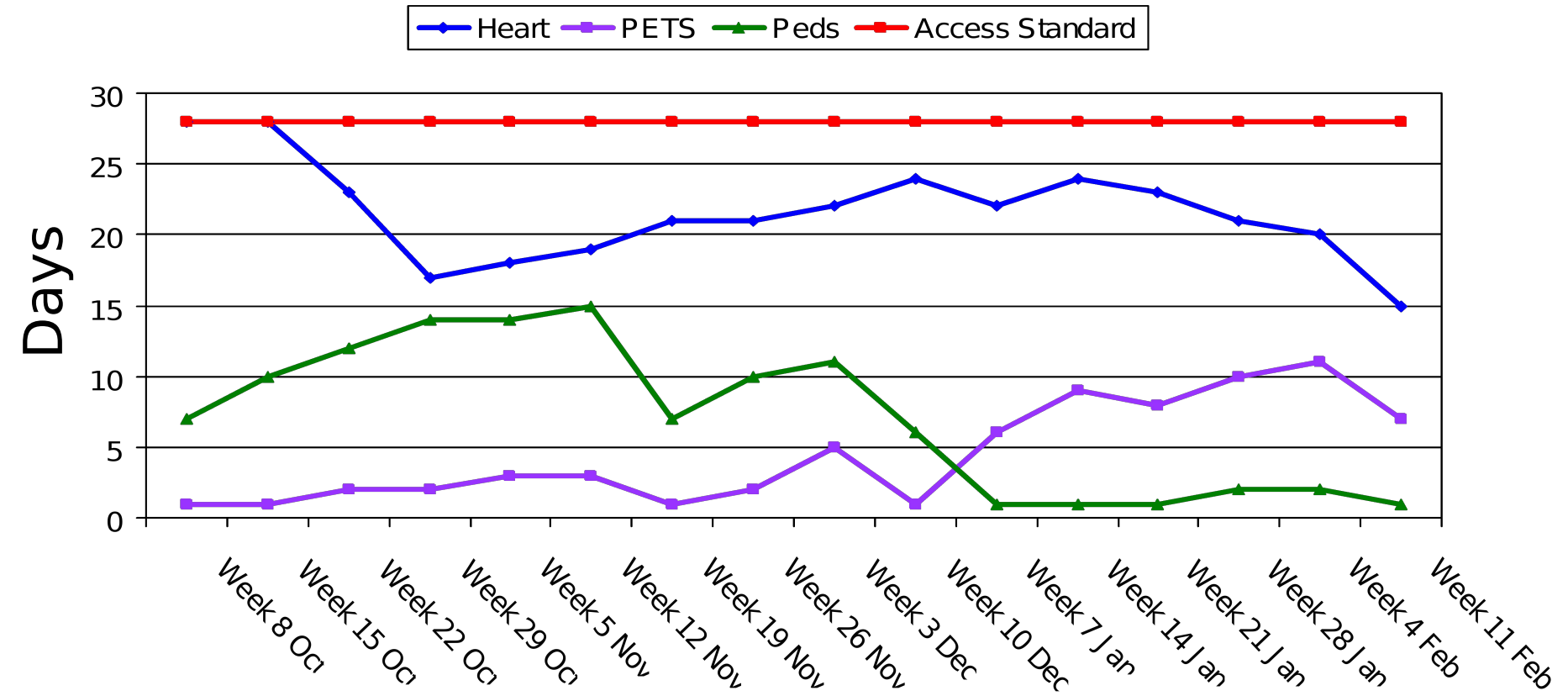


Access to Care CT

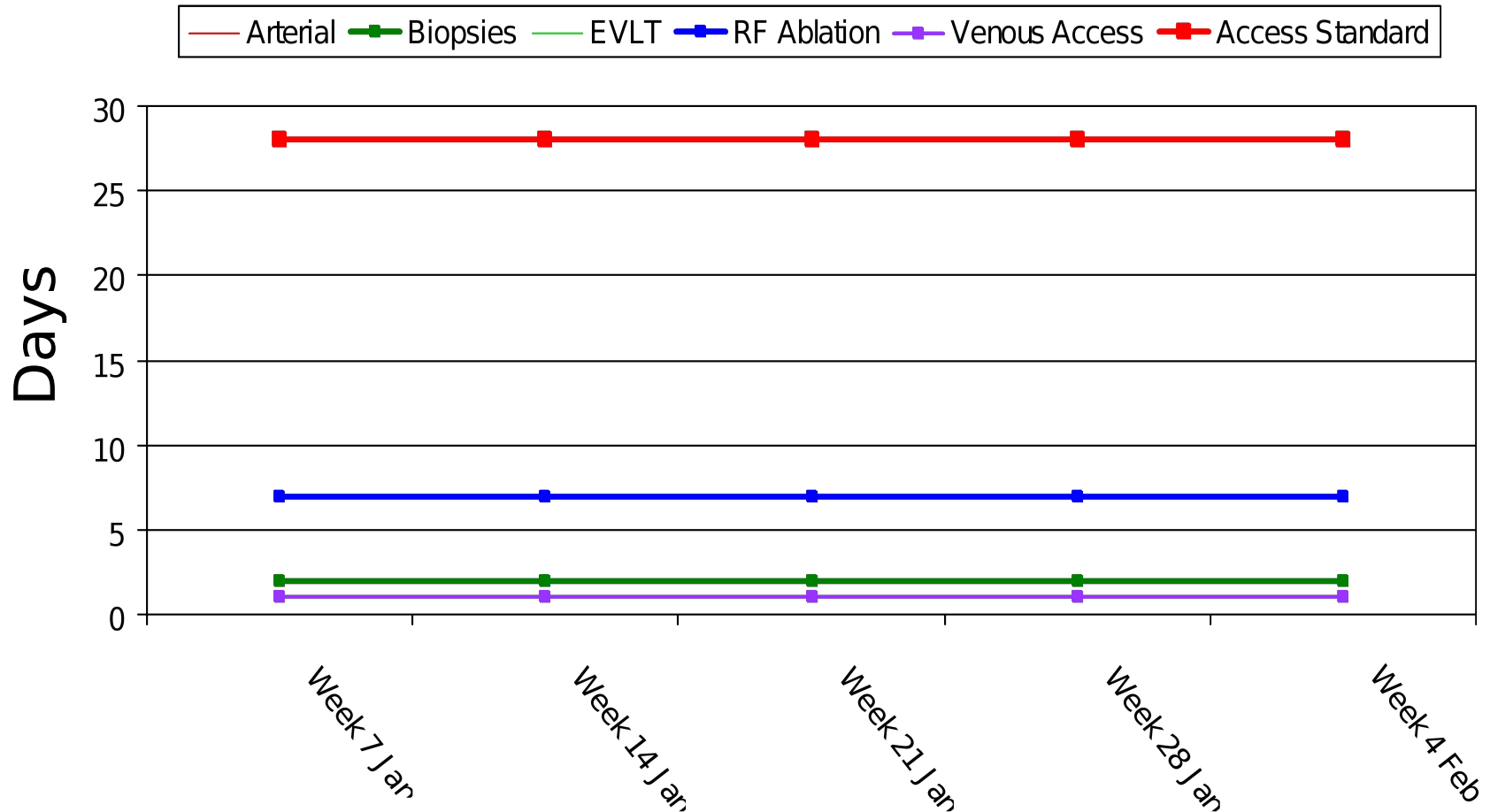
CT Access Standard



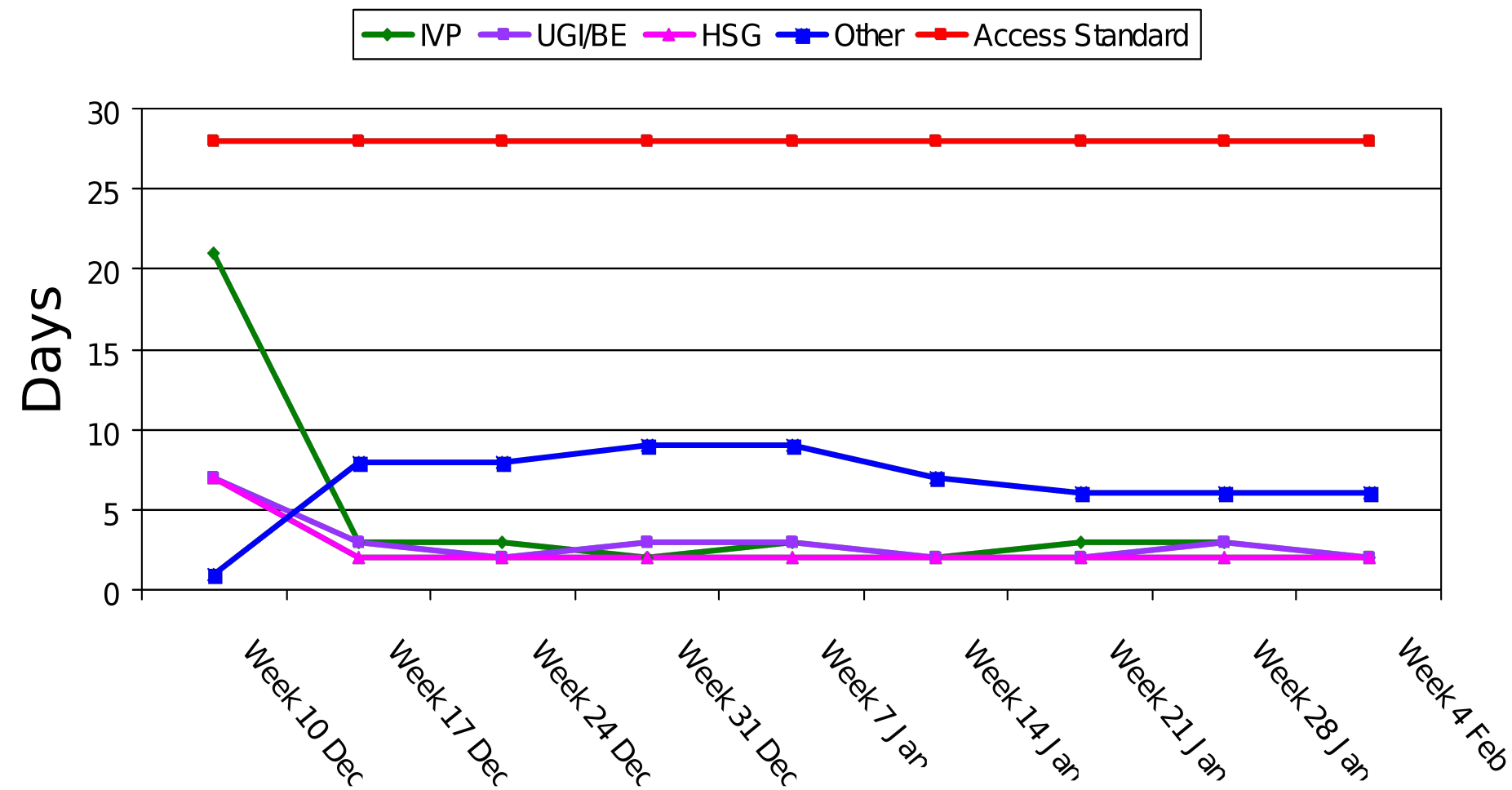
Access to Care Nuclear Med



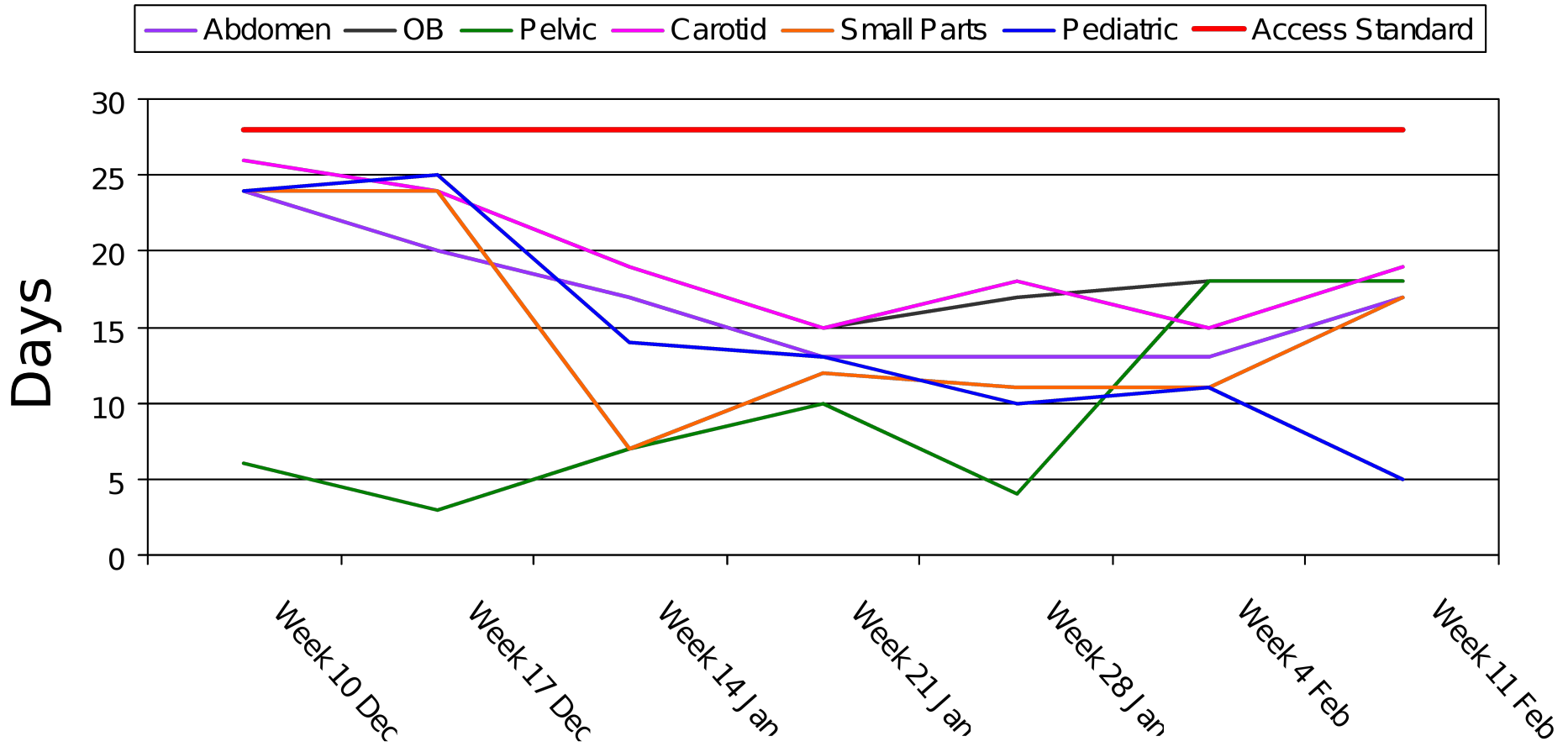
Access to Care Ultrasound



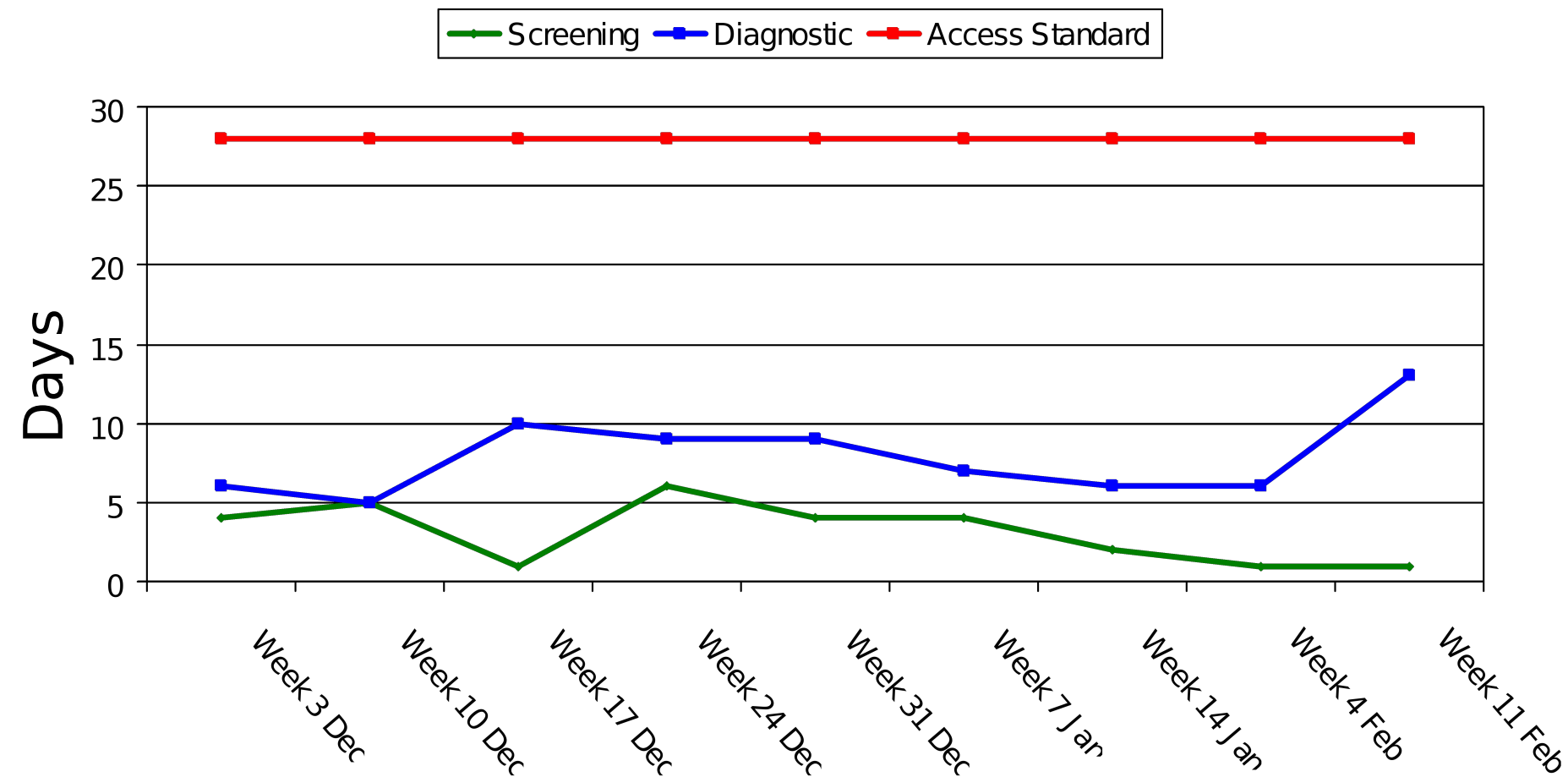
Access to Care DI



Access to Care Ultrasound



Access to Care Mammography



Radiology Purchased Care Claims

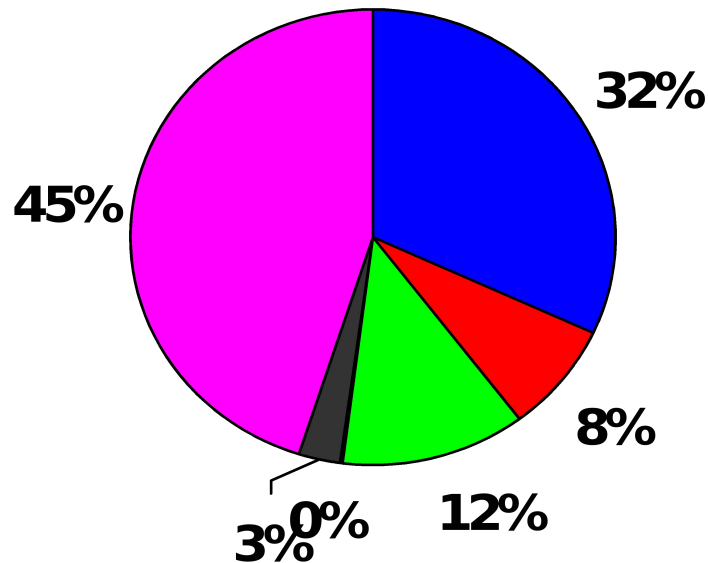
	Radiology (Ancillary)			MRI			Nuclear Medicine	
Category	FY03	FY04		FY03	FY04		FY03	FY04
AD	\$ 31,475	\$ 36,937		\$ -	\$ -		\$ 481	\$ 1,075
BAMC Prime	\$ 99,250	\$ 112,901		\$ -	\$ 5,483		\$ -	\$ 20
WHMC Prime	\$ 73,712	\$ 110,519		\$ -	\$ 5,143		\$ 9	\$ 19
Other MTFs	\$ 64,617	\$ 49,608		\$ -	\$ 409		\$ 213	\$ 530
Network PRIME	\$ 223,553	\$ 282,492		\$ -	\$ 6,084		\$ 92	\$ 122
Standard < 65	\$ 274,763	\$ 352,559		<ul style="list-style-type: none"> Radiology Ancillary Claims up 23% 				
Total < 65	\$ 767,370	\$ 945,016						
				\$ -	\$ 27,035		\$ 1,928	\$ 1,987

Nephrology Coding Analysis

Pending Results from 59 MDSS/CD

Interventional Radiology

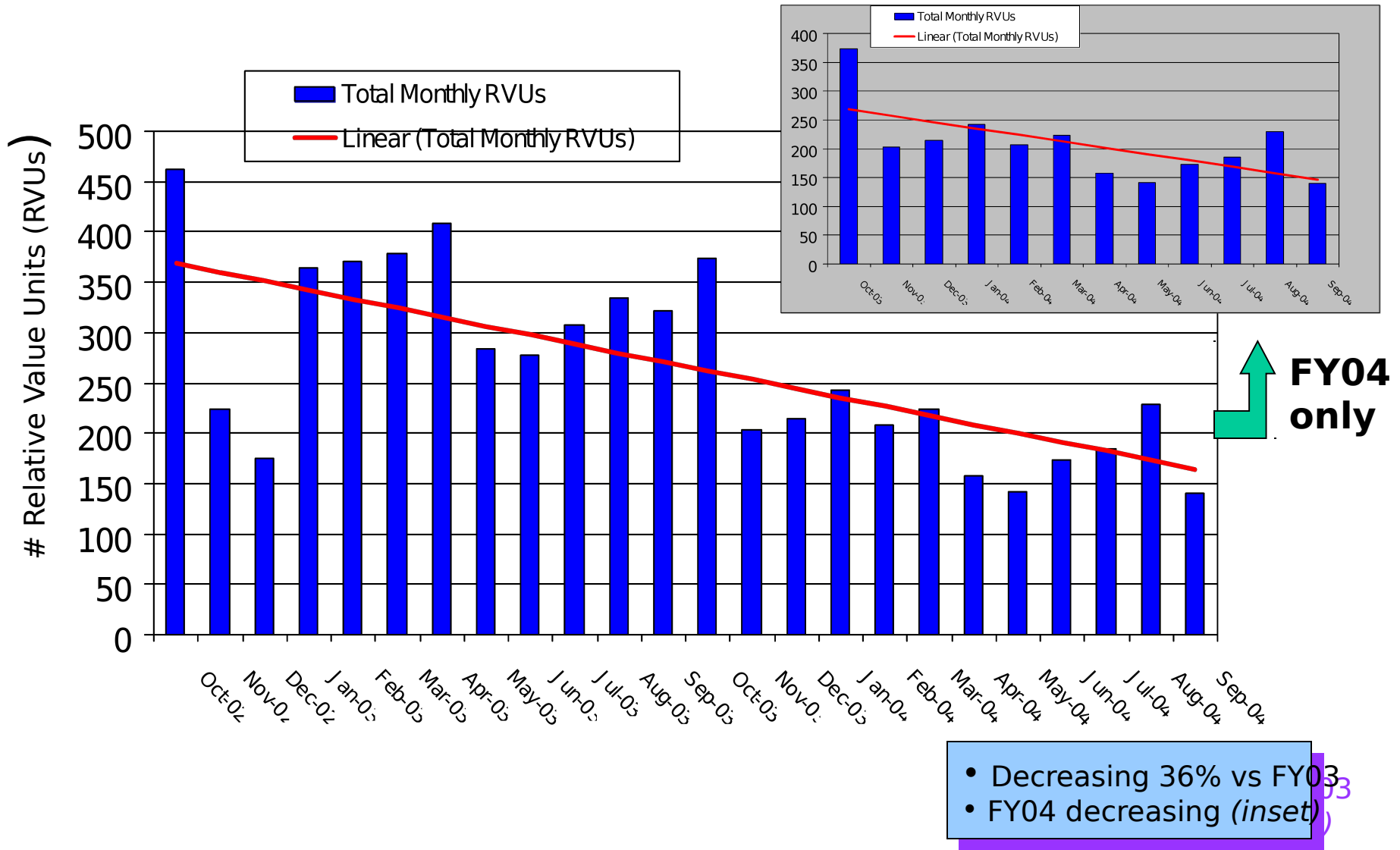
Sources of RVUs



Approx. 52% of IR
RVUs are generated from
Under age 65 PRIME
enrollees

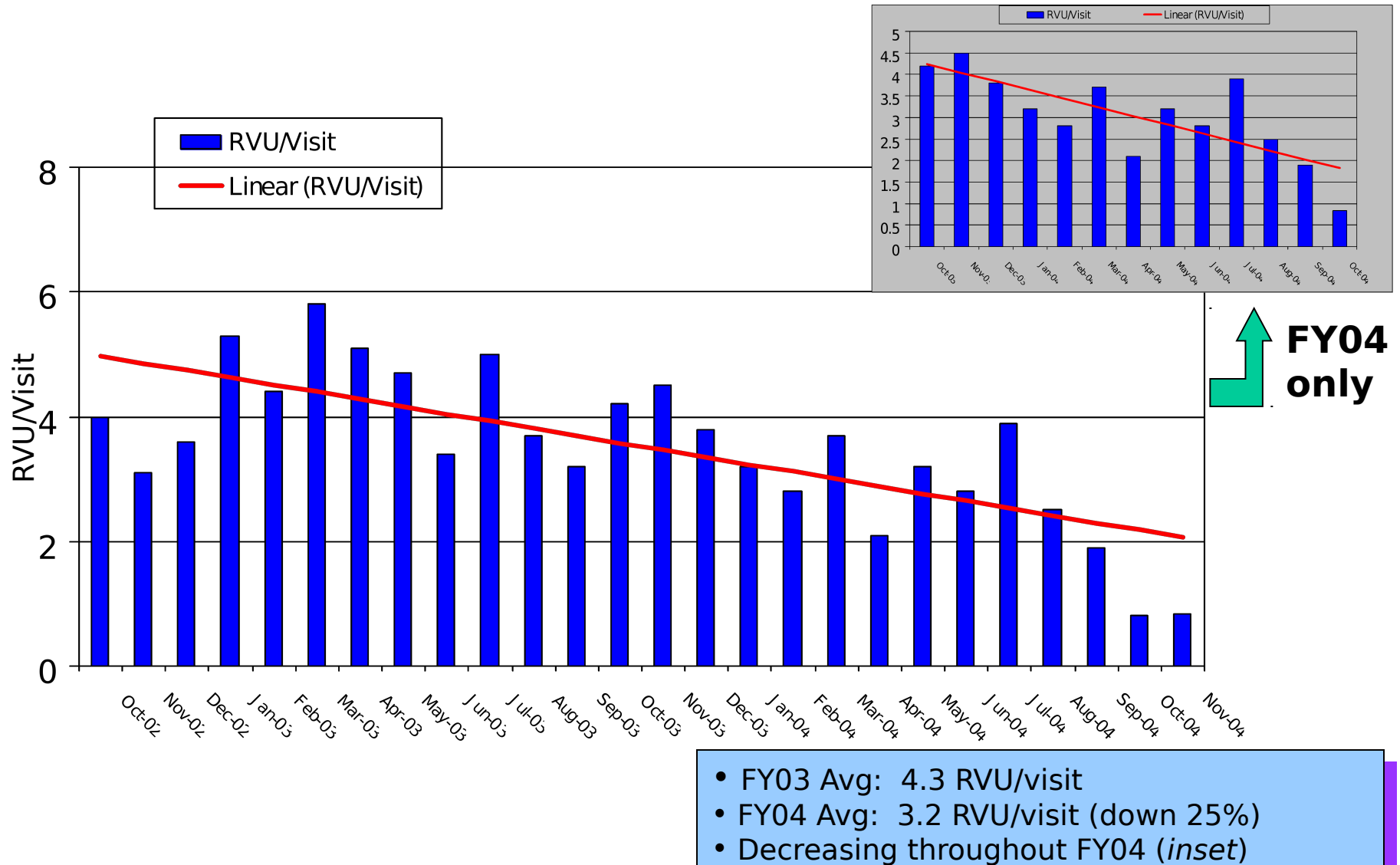
Interventional Radiology

FY03-FY04 RVUs

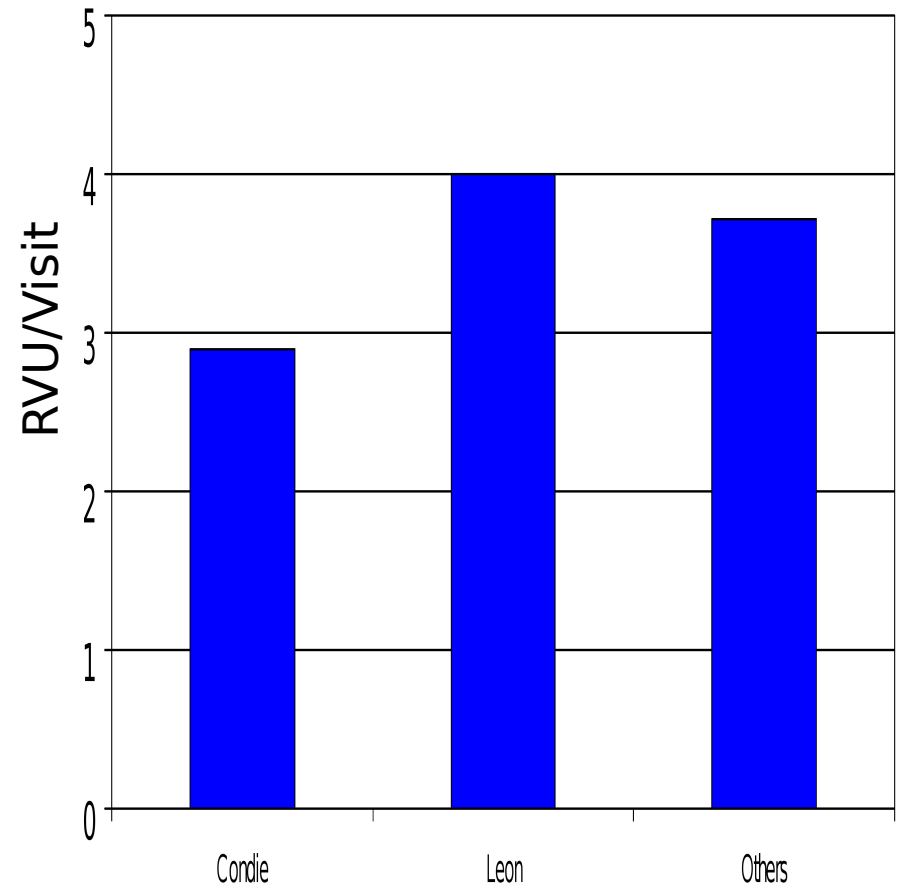
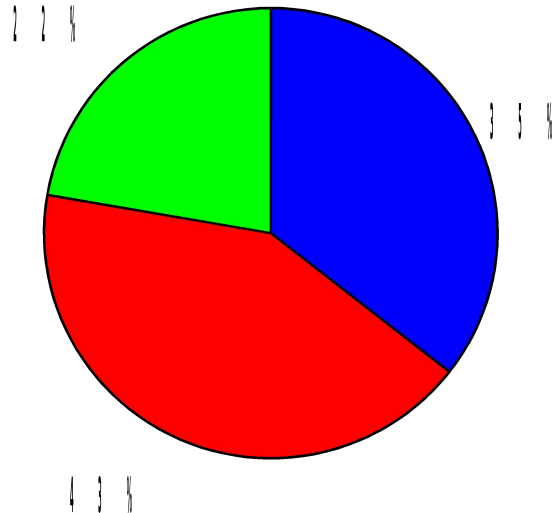


Interventional Radiology

RVU/Visit FY03-FY04



Interventional Radiology RVUs and RVU/Visit* by Provider (FY05)



* Coded visits

Interventional Radiology Benchmark Comparison per FTE

- No MGMA Interventional Radiology Benchmarks Available

Interventional Radiology

Business Plan Goals

- In FY05, your targets based on your FY03 Level of Effort (LOE)
- Goal: At *minimum*, focus on meeting/exceeding your FY04 LOE
 - Your FY04 performance compared to FY03 LOE below

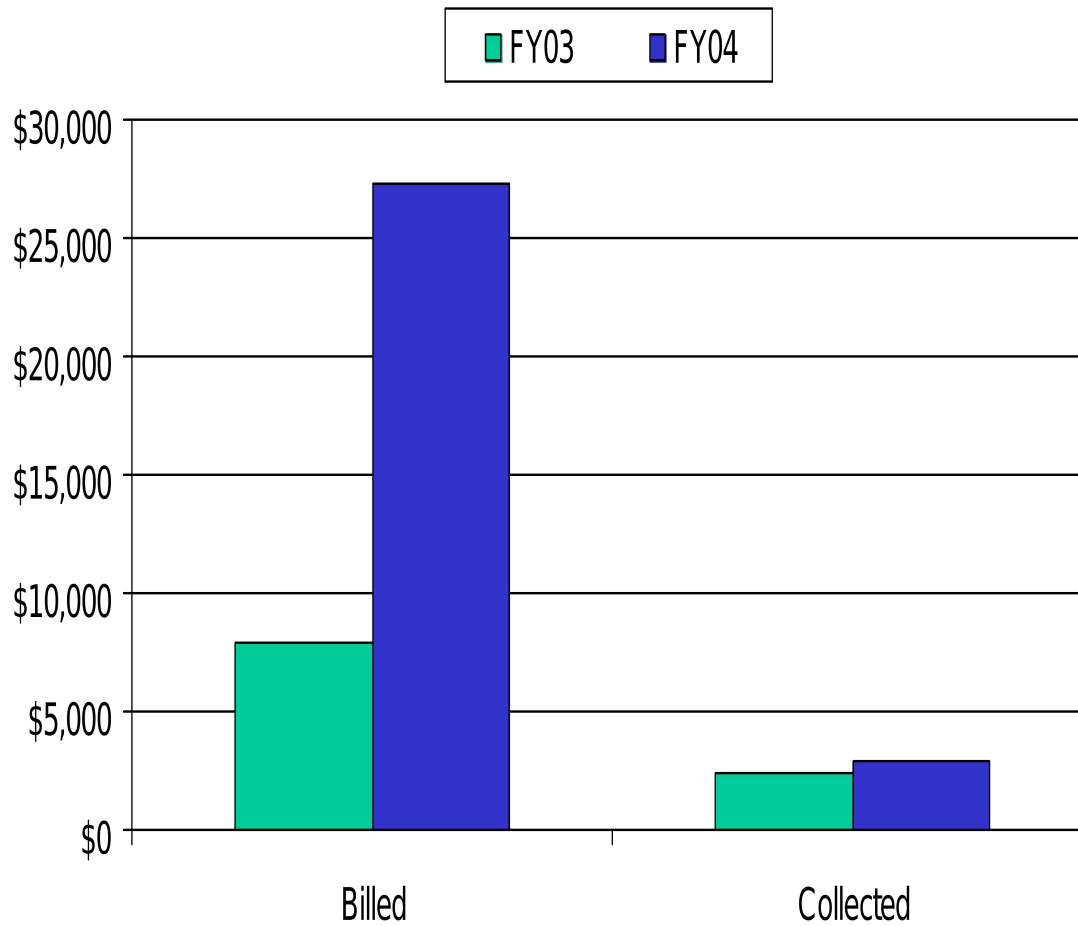
IR RVUs	FY03	FY04	Difference	\$ Impact @ \$74/RVU
PRIME WHMC	1,215	799	-416	(\$30,786)
Other PRIME	345	492	147	\$10,913
Active Duty Unenrolled	60	10	-50	(\$3,700)
Space A	278	70	-208	(\$15,374)
TP/TFL (age 65+)	2,010	1,121	-889	(\$65,775)
Total	3,907	2,492	-1,415	(\$104,722)

Minimum FY05

Goals:

RVUs: 2,492 total or
208 RVUs/mo

Interventional Radiology Reimbursements FY03 vs. FY04



- Billing up 256%
- Collections up 22%
- Rate of collections on the \$
 - FY03: 0.30
 - FY04: 0.11

Radiology

Next Steps

- Step 2
 - Follow-up: TBD
- Step 3
 - Projected WHMC/BAMC Brief: Apr/May 05



Integrity - Service - Excellence

Manpower/Staffing Diagnostic Imaging

AFSC	TITLE	OFF	ENL	CIV	Total Auth or	OFF	ENL	CIV	CON TR	Total Assig n.
043Y3	HEALTH PHYSICIST	4	0	1	5	4	0	1	2	7
044H3	NUC MED PHYSICIAN	1	0	0	1	2	0	0	0	2
044R3	DIAGNOSTIC RADIOLOGIST	47	0	0	47	16	0	0	2	18
044T3	RADIATION ONCOLOGIST	2	0	0	2	2	0	0	0	2
046N3	CLINICAL NURSE	0	0	3	3	0	0	7	2	9
3A051	INFORMATION J YMN	0	0	1	1	0	0	2	0	2
4A0X1	HLTH SVC MGT J YMN	0	3	20	23	0	2	16.5	2	20.5
4R051B	DIAG IMAGE ULT S	0	13	2	15	0	6	2	4	12
4R051C	DIAG IMAGE MRI	0	12	0	12	0	10	0	1	11
4R0X1A	DIAG IMAGE NUC M	0	9	0	9	0	7	0	0	7
4R0XX	DIAG IMAGE	0	65	11	76	0	75	9	6	90
C044R3	COMMANDER	1	0	0	1	1	0	0	0	1
N/A	DOSIMETRIST	0	0	0	1.5	0	0	0	1	1
N/A	RADIATION THERAPIST	0	0	0	5	0	0	0	5	5
N/A	FABRICATION SPECIALIST	0	0	0	1	0	0	0	1	1
043P3	Pharmacist (Matrixed)	1	0	0	1	0	0	1	0	1
4B051	Bio Env. Engineer	0	0	1	1	0	0	0	0	0
		56	102	39	204.5	25	100	38.5	26	189.5

	OFF	ENL	CIV	Total
GME students	38	0	0	38
Phase II students	0	23	0	23
Civilian Overhires	0	0	3	3
Contractors			21	20
RSA staff	0	0	4	4

Green: >95%

Yellow: 75% - 94%

Red: <75%

Data as of 20 Jan 05

Green: >95% Yellow: 75% - 94%
 Red: <75%
 Data as of 20 Jan 05